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

### SA3E Long Form

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED AMOUNT						
2/24/21	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting	2020/2			
Period				
B Owner	Instructions:  Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account covering the interest of this is the system's first filing. If not, enter the system's ID	es of the cable system on the last day of the unting period.	m. e accounting period should sui	
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM			
	Indiana Bell Telephone Company, Incorporated			
				6279520202
				62795 2020/2
	2260 E Imperial Hwy Room 839			
	El Segundo, CA 90245			
С	INSTRUCTIONS: In line 1, give any business or trade names used to			
•	names already appear in space B. In line 2, give the mailing address o	of the system, if dif	ferent from the address giv	en 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	Instructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	elist on page 1b
Area	with all communities.			
Served	CITY OR TOWN	STATE		
First	Indianapolis	IN		
Community	Below is a sample for reporting communities if you report multiple ch	annel line-ups in	Space G.	
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alda	MD	A	1
	Alliance	MD	В	2
	Gering	MD	В	3

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

FORM SA3E. PAGE 1b. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 62795 Indiana Bell Telephone Company, Incorporated Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D

in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future fillings.

Area Served

Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.

If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).

When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below.

First	
Community	

See instructions for additional information on alphabetization.

CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
Indianapolis	IN	AA	2
Alexandria	IN	AA	1
Anderson	IN	AA	2
Avoca	IN	AA	2
Avon	IN	AA	2
Bartholomew Unincorporated County	IN	AA	2
Bedford	IN	AA	2
Beech Grove	IN	AA	2
Bethany	IN	AA	2
Bloomington	IN	AA	2
Boone Unincorporated County	IN	AA	2
Brooklyn	IN	AA	2
Brownsburg	IN	AA	2
Carmel	IN	AA	2
Chesterfield	IN	AA	1
Clermont	IN	AA	2
Clinton Unincorporated County	IN	AA	2
Columbus	IN	AA	2
Country Club Heights	IN	AA	2
Crawfordsville	IN	AA	1
Cumberland	IN	AA	2
Daleville	IN	AA	1
Danville	IN	AA	1
Delaware Unincorporated County	IN	AA	1
Eaton	IN	AA	3
Edgewood (Madison County)	IN	AA	2
Edinburgh	IN	AA	2
Elwood	IN	AA	1
Fishers	IN	AA	2
Frankfort	IN	AA	1
Grant Unincorporated County	IN	AA	1
Greenfield	IN	AA	
Greenwood	IN	AA	2
Hamilton Unincorporated County	IN	AA	2
Hancock Unincorporated County	IN	AA	2
Hendricks Unincorporated County	IN	AA	2
Henry Unincorporated County	IN	AA	1
Homecroft	IN	AA	2

Howard Unincorporated County	IN	AA	1
Johnson Unincorporated County	IN	AA	2
Kokomo	IN	AA	1
Lawrence	IN	AA	2
Lawrence Unincorporated County	IN	AA	2
Lebanon	IN	AA	2
Madison Unincorporated County	IN	AA	2
Marion	IN	AA	
Marion Unincorporated County	IN	AA	3
Martinsville	IN	AA	2
Meridian Hills	IN	AA	2
	IN	AA	2
Monroe Unincorporated County	IN IN		2
Montgomery Unincorporated County  Mooresville		AA	1
	IN	AA	2
Morgan Unincorporated County	IN	AA	2
Mount Summit	IN	AA	11
Muncie	IN	AA	11
New Castle	IN	AA	11
New Palestine	IN	AA	2
Noblesville	IN	AA	2
North Crows Nest	IN	AA	2
Oolitic	IN	AA	2
Plainfield	IN	AA	2
River Forest	IN	AA	2
Rocky Ripple	IN	AA	2
Selma	IN	AA	1
Shelby Unincorporated County	IN	AA	2
Shelbyville	IN	AA	2
Southport	IN	AA	2
Speedway	IN	AA	2
Spring Hill	IN	AA	2
Spring Lake	IN	AA	2
Taylorsville	IN	AA	2
Tipton Unincorporated County	IN	AA	1
Warren Park	IN	AA	2
Westfield	IN	AA	2
Whitestown	IN	AA	1
Williams Creek	IN	AA	2
Woodlawn Heights	IN	AA	2
Wynnedale	IN	AA	2
Yorktown	IN	AA	1
Zionsville	IN	AA	2
Zionavine	114		

Add rows as necessary.

	L	

p	,

	_	

ĺ		 
l		

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 62795

## Ε

### Secondary Transmission Service: Subscribers and Rates

#### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

Indiana Bell Telephone Company, Incorporated

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

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

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

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

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

BL	OCK 1			BLOC	CK 2		
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	=
Residential:							
Service to first set	63,542	\$	19.00	HD Tech Fee	40,029	\$ 10	.00
Service to additional set(s)				Set-Top Box	63,928	\$0-\$	<b>\$15</b>
• FM radio (if separate rate)				Broadcast TV Surcharge	63,542	\$8.99-\$9	.99
Motel, hotel							
Commercial	386	\$	20.00				
Converter		1					
Residential		Ī					
Non-residential							
		T				I	

### F

### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1		BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
<ul> <li>Pay cable</li> </ul>		Motel, hotel		Video on Demand	\$0-\$100
<ul> <li>Pay cable—add'l channel</li> </ul>	\$5-\$199	Commercial		Service Activation Fee	\$0-\$35
<ul> <li>Fire protection</li> </ul>		Pay cable		Credit Management Fee	\$0-\$449
<ul><li>Burglar protection</li></ul>		Pay cable-add'l channel		Dispatch on Demand	\$99
Installation: Residential		Fire protection		Wireless Receiver	\$0 - \$49
<ul><li>First set</li></ul>	\$0-\$199	Burglar protection		HD Premium Tier	\$10
<ul> <li>Additional set(s)</li> </ul>		Other services:		DVR Upgrade Fee	\$105
<ul> <li>FM radio (if separate rate)</li> </ul>		Reconnect	\$0-\$35	Vacation Hold	\$7
Converter		Disconnect		Program Downgrade Fee	\$ 5.00
		Outlet relocation	\$0-\$55	Non-Return Eqpt Fee	\$0-\$150
		Move to new address			

FORM SA3E. PAGE 3.						.1	
			ornoroto d		SYSTEM ID#	Name	
	·		orporated		62795	<b>'</b>	
Indiana Bell Telephone Company, Incorporated							
carried the distant station on a part-time basis because of lack of activated channel capacity.							
Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AA		1	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
WALV-CD	50	I	No		Indianapolis, IN		
WCLJ	42	I	No		Bloomington, IN	See instructions for	
WDNI-CD	19	I	No		Indianapolis, IN	additional information on alphabetization.	
WFYI/WFYIHD	20/1020	E	Yes	0	Indianapolis, IN		
WHMB/WHMBHD	40/1040	I	No		Indianapolis, IN		
WIPX/WIPXHD	63/1063	I	No		Bloomington, IN		
WISH/WISHHD	8/1008	I	No		Indianapolis, IN		
WNDY/WNDYHD	23/1023	l I	No		Marion, IN		
WRTV/WRTVHD	6/1006	N	No		Indianapolis, IN		
WTHR/WTHRHD	13/1013	N _	No		Indianapolis, IN		
WTIU/WTIUHD	30/1030	Е	Yes	0	Bloomington, IN		
WTTV/WTTVHD	4/1004	N	No		Bloomington, IN		
WXIN/WXINHD	59/1059	l I	No		Indianapolis, IN		

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWNER OF CABLE SYS				SYSTEM ID	Name			
Indiana Bell Telephone Cor	npany, Inc	orporated		6279	5			
PRIMARY TRANSMITTERS: TELEVISION	N							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel								
on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is identifed.								
, , ,	CHANN	EL LINE-UP	AB	·	-			
1. CALL 2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				

	diana Bell Telephone Company, Incorporated	SYSTEM ID# 62795	Name
Inst all a (as i page	ROSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount you pay. I amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trar identifed in space E) during the accounting period. For a further explanation of how to compute th ge (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  PORTANT: You must complete a statement in space P concerning gross receipts.	nsmission service	K Gross Receipts
Instru Con Con If yo fee t If yo accc If pa	YRIGHT ROYALTY FEE  uctions: Use the blocks in this space L to determine the royalty fee you owe:  mplete block 1, showing your minimum fee.  mplete block 2, showing whether your system carried any distant television stations.  our system did not carry any distant television stations, leave block 3 blank. Enter the amount of the from block 1 on line 1 of block 4, and calculate the total royalty fee.  our system did carry any distant television stations, you must complete the applicable parts of the loompanying this form and attach the schedule to your statement of account.  art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on  ck 3 below.  art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on  elow.	DSE Schedule on line 1 of	L Copyright Royalty Fee
2 in Block	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entenabled below.  MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are requileast the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 playstem's gross receipts for the accounting period.  Line 1. Enter the amount of gross receipts from space K  Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.  This is your minimum fee.	red to pay at	
1	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, you not "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  X Yes—Complete the DSE schedule.  No—Leave block 3 below blank and complete lies.	nust check	
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero  Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	\$ 5,580.24 0.00	
	Line 3. Add lines 1 and 2 and enter here \$	5,580.24	
Block 4		\$ 275,381.64 0.00	Cable systems submitting additional deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE	\$ 725.00	the Licensing additional fees. Division for the appropriate
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	276,106.64	form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page general instructions located in the paper SA3 form for more information.)	(i) of the	

ACCOUNTING PERIOD: 2020/2
FORM SA3E\_PAGE 8

		FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Indiana Bell Telephone Company, Incorporated	SYSTEM ID# 62795
	CHANNELS	
M	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.	
Channels	Enter the total number of channels on which the cable	
	system carried television broadcast stations	23
	<u> </u>	
	Enter the total number of activated channels     which the cable system carried talevision breadeast stations.	
	on which the cable system carried television broadcast stations and nonbroadcast services	631
		'
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual	
Individual to	we can contact about this statement of account.)	
Be Contacted		
for Further	Name Myriam Nassif Telephone	310-964-1930
Information		
	Address 2260 E Imperial Hwy Room 839	
	(Number, street, rural route, apartment, or suite number)	
	El Segundo, CA 90245 (City, town, state, zip)	
	5 / / / T	
	Email mn112s@att.com Fax (optional	
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regula	ations )
0	CENTIFICATION (This statement of account must be certified and signed in accordance with copyright Office regular	ations.)
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B;	or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy	stem as identified
	in line 1 of space B and that the owner is not a corporation or partnership; or	Storr do rachanea
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owne	r of the cable system
	in line 1 of space B.	
	<ul> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained have true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.</li> </ul>	nerein
	[18 U.S.C., Section 1001(1986)]	
	/s/ Michael Santogrossi	
	7.57 Military Califograssi	
	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 th	e hov and press the "E2"
	button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatit	
	Typed or printed name: Michael Santogrossi	
	)	
	Title: Vice President – Finance	
	(Title of official position held in corporation or partnership)	
	Date: February 24, 2021	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#						
Indiana Bell Telephone Company, Incorporated	62795	Name					
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by addin lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the service of providing secondary transmissions of primary broadcast transmitters, the system shall not in the service of providing secondary transmissions of primary broadcast transmitters.	e basic nclude sub-	P Special Statement					
scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."  For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.							
During the accounting period did the cable system exclude any amounts of gross receipts for secondary tran made by satellite carriers to satellite dish owners?	smissions	Exclusion					
X NO							
YES. Enter the total here and list the satellite carrier(s) below							
Name Mailing Address Name Mailing Address							
INTEREST ASSESSMENTS							
You must complete this worksheet for those royalty payments submitted as a result of a late payment or under For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	erpayment.	Q					
Line 1 Enter the amount of late payment or underpayment		Interest Assessment					
x		7.00000					
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	-						
X (	0.00274						
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L, (page 7)	_						
	est charge)						
* To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For further assistation contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	ince please						
** 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 Of please list below the owner, address, first community served, accounting period, and ID number as given in t filing.							
Owner							
Address							
First community served							
Accounting period							
ID number							

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

ACCOUNTING PERIOD: 2020/2

DSE SCHEDULE. PAGE 10.

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

#### FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

### **TOTAL OF DSEs**

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

### THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

# COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE SCHEDULE

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

#### PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

Distant Stations Coursed

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

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

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

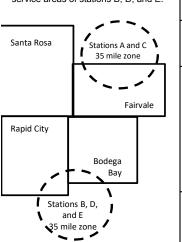
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

#### **EXAMPLE**:

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

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.



	TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00
	TOTAL DOEs	0.470		TOTAL ODGGO DECEMBED	<u>ФСОО ООО ОО</u>
	E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
n	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
	Distant Stations Carried	a	identification	of Subscriber Groups	

Identification of Cubecular Cucuna

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6.384.00

	ψ0,304.00									
First Subscriber Group		Second Subscriber Group		Third Subscriber Group						
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)						
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00					
DSEs	2.472	DSEs	1.083	DSEs	1.389					
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03					
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80					
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23					
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03					

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

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

**ACCOUNTING PERIOD: 2020/2** 

DSE SCHEDULE. PAGI	ī					OTEM ID "						
1	LEGAL NAME OF OWNER OF CAE				Si	#STEM ID 62795						
<u> </u>	Indiana Bell Telephone Company, Incorporated											
	SUM OF DSEs OF CATEGO											
	Add the DSEs of each static											
	Enter the sum here and in lin		0.50									
	Instructions:			_		ı						
2	in the column headed "Cal	I Sian": list the cal	Il signs of all distant station	s identified by th	e letter "O" in column 5							
	of space G (page 3).											
	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-											
of DSEs for	mercial educational station, give the DSE as ".25."  CATEGORY "O" STATIONS: DSEs											
Category "O"		NS: DSEs										
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
	WFYI/WFYIHD	0.250										
	WTIU/WTIUHD	0.250										
				<u> </u>								
Add rows as				<del>" </del>  -								
necessary.				<del></del>								
Remember to copy all		·····		<del> </del>								
formula into new		····		<del> </del>								
rows.		·····		<mark> </mark>  -								
				<del></del>								
				<mark></mark>								
						•••••						
				<u> </u>								
				<u> </u>								
		····		<del> </del>								
		·····		<mark> </mark>								
		·····		<del> </del>								
		····		<del> </del>  -								
		·····		<mark></mark>								
				<del></del>								
				<mark></mark>								
				<mark></mark>								
				<u> </u>								
				<del></del>								
		····		<del> </del>  -								
		····		<del></del>								
				<del></del>								
I												

Name	Indiana Bell Telephone Company, Incorporated SYSTEM IC								
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-\ Column 6	st the call sign of all distar: For each station, give the correspond with the inform: For each station, give the Divide the figure in column at least to the third decime: For each independent simulations as ".25." Multiply the figure in column.	te number of hours nation given in spate total number of lem 2 by the figure hal point. This is the tation, give the "typumn 4 by the figure	your cable system toe J. Calculate only ours that the static in column 3, and give "basis of carriage be-value" as "1.0." In the in column 5, and give in	carried the static y one DSE for each in broadcast ove we the result in d value" for the state For each network	oon during the accounting pach station.  r the air during the accounce image in column 4. This	nting period. Ifigure must ational station,		
Capacity		(	CATEGORY LA	C STATIONS:	COMPUTATI	ON OF DSEs			
	1. CALL SIGN	2. NUMBEI OF HOU CARRIE SYSTEM	IRS D BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE			SE.	
			÷		=	<u>x</u>	=		
			÷ ÷		=	x x	=		
			÷			x	=		
			÷		=	x	=		
			÷			x	=		
			<u>-</u>		=	x x			
	Add the DSEs	OF CATEGORY LAC ST of each station. m here and in line 2 of pa		e,		0.00			
Computation of DSEs for Substitute-Basis Stations	for space I).  te-  column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted								
			JBSTITUTE-BA			ATION OF DSEs	T		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	
		÷		=		+		=	
		÷		=		-		=	
		÷		=		-	<b>-</b>	=	
		÷		=		-		=	
	Add the DSEs	÷ OF SUBSTITUTE-BASIS of each station. m here and in line 3 of pa	S STATIONS:			0.00		=	
5		ER OF DSEs: Give the amo		s in parts 2, 3, and 4	1 of this schedule	and add them to provide th	ne total		
Total Number	1. Number	of DSEs from part 2 ●				<b>-</b>	0.50		
of DSEs	2. Number	of DSEs from part 3 ●				<u> </u>	0.00		
	3. Number	of DSEs from part 4 ●				<b>-</b>	0.00		
	TOTAL NUMBE	R OF DSEs						0.50	

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2020/2

	L NAME OF OWNER OF CABLE SYSTEM: ana Bell Telephone Company, Incorporated							SYSTEM ID# 62795		
			i poi aleu					02/95		
Instructions: Bloc In block A:	k A must be comp	leted.							•	
<ul> <li>If your answer if " schedule.</li> </ul>	'Yes," leave the re	mainder of pa	irt 6 and part 7	of the DSE sched	ule blank and	complete part	8, (page 16) of the		6	
If your answer if "	'No," complete bloo			TELEVISION M	ARKETS				Computation of	
Is the cable system	n located wholly ou					tion 76.5 of FC	C rules and regula	tions in	3.75 Fee	
effect on June 24,		a a la a desda a Di		LETE THE DEMAN	NDED OF DA	DT C AND 7	· ·			
	lete blocks B and		J NOT COMP	LETE THE REMAI	NDER OF PA	ART 6 AND 7.				
M He comp	ioto bioono b una				WITTED DO	. <del>.</del>				
Column 1:	1 :-4 4h11 -:			RIAGE OF PERM						
CALL SIGN	under FCC rules	and regulatio e DSE Scheo	ns prior to Jun Iule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re Act of 2010.)	ther explanati	on of permitted	stations, see the	,		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty statio	les and reguled pursuant to on as defined	ations cited be the FCC mar in 76.5(kk) (76	sis on which you ca low pertain to those ket quota rules [76 3.59(d)(1), 76.61(e (c), 76.61(d), 76.63	e in effect on ( .57, 76.59(b), )(1), 76.63(a)	June 24, 1981. 76.61(b)(c), 76 referring to 76.	6.63(a) referring to			
	D Grandfathered instructions for E Carried pursua	I station (76.6 r DSE sched ant to individu	5) (see paragrule). al waiver of F0	aph regarding sub	stitution of gra	indfathered sta	tions in the			
	•	HF station wi	thin grade-B c	ontour, [76.59(d)(5	•		ring to 76.61(e)(5)]			
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 o tter "F" in column 2			rksheet on page 14	4 of		
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE		
WFYI/WFYI WTIU/WTIU		0.25 0.25								
VV 110/VV 110		0.23								
			1			H		0.50		
				NADUTATION OF	- 0 75 555			0.00		
		E	SLOCK C: CC	MPUTATION OF	- 3.75 FEE					
Line 1: Enter the	total number of l	DSEs from p	part 5 of this s	schedule						
Line 2: Enter the	sum of permitted	d DSEs from	ı block B abo	ve						
Line 3: Subtract I (If zero, le				of DSEs subject 7 of this schedule		ate.				
Line 4: Enter gro	ss receipts from	space K (pa	ge 7)						Do any of the DSEs represent	
							x 0.03	375	partially permited/	
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter su	m here				X		partially nonpermitted	
Line 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 9 instructions.	
Line 7: Multiply li	ne 6 by line 5 an	d enter here	and on line	2, block 3, space	L (page 7)			0.00		

	WNER OF CABLE S elephone Comp		rporated					YSTEM ID# 62795	Name
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTINU	JED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
CICIV	BACIC		CIGIT	BAGIC			B/ (OIC		Computation of 3.75 Fee

**ACCOUNTING PERIOD: 2020/2** 

Name	LEGAL NAME OF OWN								S	YSTEM ID#	ŧ
Name	Indiana Bell Te	lephone Co	mpany, Incorp	orated						62795	; _
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule.  Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981.  Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1).  Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters:  (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)										
		PERMIT	TED DSE FOR ST	ATIONS CARRI	ED	ON A PART-TIME ANI	D SUBSTIT	UTE BASIS			_
	1. CALL	2. PRIC		COUNTING		4. BASIS OF		RESENT	6. P	ERMITTED	_
	SIGN	DSE	F	PERIOD		CARRIAGE		DSE		DSE	
											••••
							l				
<b>7</b> Computation of the	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.										
Syndicated			BLOG	CK A: MAJOR	TI	ELEVISION MARKE	ĒΤ				
Exclusivity									04.400		
Surcharge		-	· · · · · · · · · · · · · · · · · · ·	r television mark	et a	as defned by section 76.5		es in effect June	e 24, 198	1?	
	X Yes—Complete	blocks B and	C .			No—Proceed to	part 8				
	BLOCK B: C	arriage of VHF	Grade B Contour	Stations		BLOCI	ΚC: Compι	utation of Exem	pt DSEs		
	Is any station listed in commercial VHF station or in part, over the cal	on that places				Was any station listed nity served by the cabl to former FCC rule 76.	e system pr	•	•		
	Yes—List each st		its appropriate pern art 8.	nitted DSE		Yes—List each sta			e permitte	ed DSE	
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	<sub>2N</sub>	DSE	
	CALL SIGN	DSL	CALL SIGN	DSL		CALL SIGN	DSL	CALL SIC	DIN	DOL	
			TOTAL DSEs	0.00				TOTAL DS	SEs	0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Indiana Bell Telephone Company, Incorporated	SYSTEM ID# 62795	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	25,881,733.14	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below.  X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      X Yes—Complete part 9 of this schedule.      No—Complete the applicable section below.  If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS	E	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.  A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	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	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:										
	Indiana Bell Telephone Company, Incorporated										
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.									
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$									
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$									
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here.									
		D. Enter 0.00089 of gross receipts (the amount in section 1)									
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.									
		F. Multiply line D by line E and enter here									
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)									
		Syndicated Exclusivity Surcharge.									
8		<b>ctions:</b> ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B;  however, if block A of pa	art								
		checked "Yes," use the total number of DSEs from part 5.									
Computation		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. Ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.									
of	1	r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belonger	ow								
Base Rate Fee	blank.  What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers										
	what is a partially distant station? A station is partially distant if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local										
	service area," see page (v) of the general instructions.										
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?										
	X Yes—Complete part 9 of this schedule. No—Complete the 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)										
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.									
	2	(If block A of part 6 was checked "Yes,"									
		use the total number of DSEs from part 5.)									
	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) ▶ \$									
			<del></del>								
		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)	0.00								
		Base Rate Fee	0.00								

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2020/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: Indiana Bell Telephone Company, Incorporated	SYSTEM ID# 62795 Name
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
4	8
A. Enter 0.01064 of gross receipts  (the amount in section 1)  ▶\$	
B. Enter 0.00701 of gross receipts  (the amount in section 1)  \$ \_	Computation of
C. Multiply line B by 3.000 and enter here <b>▶</b>	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 <b>&gt;</b> \$	
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
<b>IMPORTANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of televisio instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multip Space G.	
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your bas	
receipts from subscribers located within the station's local service area, from your system's total gross receipts. exclusion, you must:	To take advantage of this of  Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are	e distant to the same
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. D DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base ra Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your sy	ate fee for each group. Stem Surcharge
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exalso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A your cable system is wholly located outside all major television markets, complete block A only.	
How to Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
<b>Step 1:</b> For each community served, determine the local service area of each wholly distant and each partially distant to that community.	<b>.</b>
<b>Step 2:</b> For each wholly distant and each partially distant station you carried, determine which of your subscriber outside the station's local service area. A subscriber located outside the local service area of a station is distant same token, the station is distant to the subscriber.)	
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they ar subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations system will have only one subscriber group when the distant stations it carried have local service areas that coin	s. Note that a cable
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each or groups.	
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 station that is dissubscribers in the group.</li> </ul>	stant to all of the
• If:	
1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you 4 of this schedule; or,	
<ol><li>any portion of your system is located in a major or smaller televison market, give each station's DSE as you g part 6 of this schedule.</li></ol>	ave it in block B,
• Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the in the paper SA3 form.	general instructions
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedu page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You cactual calculations on the form.	group (that is, the total

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62795 Indiana Bell Telephone Company, Incorporated Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE Indiana Bell Telep			ted			S	62795	Name
		COMPUTATION O		TE FEES FOR EAC	H SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WTIU/WTIUHD	0.25							Base Rate
								and
								Syndicat
								Exclusiv
								Surchar
								for
			<u></u>					Partial
	···		<mark></mark>				·····	Distan Station
			<del>-</del>					Otation
otal DSEs			0.25	Total DSEs			0.00	
Gross Receipts First G	Group	s 1.96	1,195.25	Gross Receipts Sec	ond Group	\$ 23,8	352,218.99	
•	•	·			·	· · · · · · · · · · · · · · · · · · ·		
Base Rate Fee First G	Group	\$	5,216.78	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
VTIU/WTIUHD	0.25							
WFYI/WFYIHD	0.25							
			<del> </del>					
			<u></u>					
	<del></del>							
	-							
otal DSEs			0.50	Total DSEs			0.00	
Gross Receipts Third (	Group	\$ 68	3,318.90	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third (	Group	\$	363.46	Base Rate Fee Fou	irth Group	\$	0.00	
		fees for each subscr	iber group a	s shown in the boxes	above.			
nter here and in bloc	k 3, line 1, sp	pace L (page 7)				\$	5,580.24	

LEGAL NAME OF OWN Indiana Bell Tele			ated			\$	62795	Name	
	BLOCK A:	: COMPUTATION (	OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP			
FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP									
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩			9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								and	
			<mark></mark>					Syndicated	
								Exclusivity Surcharge	
			····					for	
								Partially	
								Distant	
								Stations	
			····						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTI	H SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			····						
			·····						
Total DSEs	•		0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group a	II s shown in the boxes	above.	\$			

LEGAL NAME OF OWNE			ated			•	62795	Name
				TE FEES FOR EAC				
	FIRST	SUBSCRIBER GRO		<u> </u>	SECON	SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA 0				COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
			<u></u>					and
								Syndicate
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
	<del></del>							
Total DSEs			0.00	Total DSEs	Total DSEs		0.00	
Gross Receipts First G	iroup	\$ 1,96	1,195.25	Gross Receipts Sec	ond Group	\$ 23,8	352,218.99	
Base Rate Fee First C	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	H SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<b>.</b>							
	···		····		······			
	···		····					
			····					
			···				·····	
			···					
	•••		····					
	···		····				·····	
Fotal DSEs			0.00	Total DSEs			0.00	
	Group	\$ 6	0.00 8,318.90	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Total DSEs Gross Receipts Third (	·		8,318.90	Gross Receipts Fou	·		0.00	
	·	<u>\$</u> 6			·	\$		
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fou	rth Group		0.00	

### Nonpermitted 3.75 Stations

LEGAL NAME OF OWN Indiana Bell Tele		E SYSTEM: mpany, Incorpor	ated				62795	Name
		: COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		BER GROUP  SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	9 Computation		
CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE		DSE	CALL SIGN DSE		of	
								Base Rate Fe
								Syndicated Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	UP			SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

**ACCOUNTING PERIOD: 2020/2** 

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Indiana Bell Telephone Company, Incorporated 62795 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation Second 50 major television market First 50 major television market of **INSTRUCTIONS: Base Rate Fee** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Surcharge for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **Partially** 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 Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

**ACCOUNTING PERIOD: 2020/2** FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Indiana Bell Telephone Company, Incorporated 62795 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation Second 50 major television market First 50 major television market of **INSTRUCTIONS: Base Rate Fee** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Surcharge for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **Partially** 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 Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE EIGHTH SUBSCRIBER GROUP SEVENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group . . . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown