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	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:					
Accounting Period	2021/1						
B Owner	- One the full regaring the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo-						
	LE	GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM					
		Nevada Bell Telephone Company					
					62982	220211	
					62982	2021/1	
		2260 E Imperial Hwy Room 839 El Segundo, CA 90245					
С	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless thes 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, zjp code)					
D	Inc	tructions: For complete space D instructions, see page 1b. Identify	only the fret com	nunity conved below and re	list on pag	10 1h	
Area		n all communities.		numity served below and re	anst on pag	di e	
Served		CITY OR TOWN	STATE				
First		Reno	NV				
Community	В	elow is a sample for reporting communities if you report multiple ch		1	ſ		
	Ald	CITY OR TOWN (SAMPLE)	STATE MD	CH LINE UP	SUB	GRP#	
Sample		ance	MD	A		2	
	Gei		MD	B		3	
	-	ation 444 of tills 47 of the United Ototoe Code authorized the Constitution of the Constitution	t the nersenally istantic	ing information (DII) register to the	this		
		ction 111 of title 17 of the United States Code authorizes the Copyright Offce to collect your statement of account. PII is any personal information that can be used to identifi					
numbers. By provi	ding P	II, you are agreeing to the routine use of it to establish and maintain a public record,	which includes appearir	ng in the Offce's public indexes ar	nd in		
		for the public. The effect of not providing the PII requested is that it may delay proces ements of account, and it may affect the legal suffciency of the fling, a determination			ne		
•			,				

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

08/27/2021

ORM	SA3E	PAGE	1h
	JAJL.	FAGE	ID.

FORM SA3E. PAGE 1b.							
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#				
Nevada Bell Telephone Company			62982				
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings							
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home below the identified city or town.	e parks should be	reported in paren	theses				
If all communities receive the same complement of television broadcast stations (i.e., one all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each rele designated by a number (based on your reporting from Part 9)	e column blank. If evant community	you report any sta with a subscriber	ition group				
When reporting the carriage of television broadcast stations on a community-by-communichannel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	a subscriber grou						
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	-			
Reno	NV			First			
Carson City	NV			Community			
DAYTON	NV						
FERNLEY	NV						
Incline Village	NV						
LYON UNINCORPORATED COUNTY	NV			See instructions for			
SPARKS	NV			additional information			
SUN VALLEY	NV			on alphabetization.			
WASHOE UNINCORPORATED COUNTY	NV						

Name	LEGAL NAME OF OWNER OF CABL							S	YSTEM ID	
	Nevada Bell Telephone	Company							6298	
	SECONDARY TRANSMISSION	SERVICE: SL	JBSCRI	BERS AND R	ATES					
E	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									
Secondary	about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the									
Transmission			June 30 or December 31, as the case may be).							
Service: Sub-			blocks in space E call for the number of subscribers to the cable s							
scribers and Rates	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									
Nates	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									
	category, but do not include disc									
	Block 1: In the left-hand blo				-	-			ble	
	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									
	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 ca						•			
	first set" and would be counted of									
	Block 2: If your cable syster	n has rate cat	egories	for seconda	ry transmis	ssion service t	hat are dif	ferent from those	9	
	printed in block 1 (for example, t									
	with the number of subscribers a	and rates, in the	e right-h	and block. A t	wo- or three	e-word descripti	on of the s	ervice is		
	sufficient.				1 1					
	BL			BLOCK 2						
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RATE	
	Residential:									
	 Service to first set 		7,095	\$ 19.00	HD Tech	Fee		4,430	\$ 10.0	
	 Service to additional set(s) 				Set-Top	Box		7,146	\$0-\$1	
	 FM radio (if separate rate) 				Broadcas	st TV Surcharg	е	7,095	\$8.99-\$9.9	
	Motel, hotel									
	Commercial		51	\$ 20.00						
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC					t to all your ca	ble system	o's services that	Nere	
F	SERVICES OTHER THAN SEC In General: Space F calls for r	ate (not subs	criber) i	nformation w	ith respect				were	
F	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, f	rate (not subs hose services	criber) i that are	nformation w not offered in	vith respect combinatio	n with any seco	ndary trans	smission	were	
F	SERVICES OTHER THAN SEC In General: Space F calls for r	ate (not subs hose services re two exceptio	criber) i that are ons: you	nformation w not offered in do not need to	vith respect combinatio o give rate i	n with any seco nformation cone	ndary trans cerning (1)	smission services	were	
•	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur	rate (not subs hose services re two exceptio or facilities furr hit in which it is	criber) i that are ons: you nished to	nformation w not offered in do not need to nonsubscrib	vith respect combinatio o give rate i ers. Rate in	n with any seco nformation cond formation shoul	ndary trans cerning (1) d include b	smission services oth the	were	
Services Other Than Secondary	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the	rate (not subso hose services re two exceptio or facilities furr hit in which it is rate column.	criber) i that are ons: you nished to usually	nformation w not offered in do not need to nonsubscrib billed. If any r	vith respec combinatio o give rate i ers. Rate in ates are cha	n with any seco nformation cond formation shoul arged on a varia	ndary trans cerning (1) d include b able per-pro	smission services oth the ogram basis,	were	
Services Other Than Secondary Fransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r	ate (not subso hose services re two exceptio or facilities furr hit in which it is rate column. rate charged b	criber) i that are ons: you hished to usually by the c	nformation w not offered in do not need to o nonsubscrib billed. If any r able system	vith respect combinatio o give rate i ers. Rate in ates are cha for each of	n with any seco nformation cond formation shoul arged on a varia f the applicable	ndary trans cerning (1) d include b able per-pro	smission services oth the ogram basis, listed.		
Services Other Than Secondary	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r Block 2: List any services the	ate (not subsy- hose services of two exception or facilities furr- nit in which it is rate column. rate charged to nat your cable	criber) i that are ins: you hished to usually by the c system	nformation w not offered in do not need to nonsubscrib billed. If any r able system furnished of	vith respect combinatio o give rate i ers. Rate in ates are cha for each of offered du	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou	ndary trans cerning (1) d include b able per-pro e services unting peri	smission services oth the ogram basis, listed. iod that were not		
Services Other Than Secondary Fransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r Block 2: List any services the listed in block 1 and for which a	rate (not subs hose services re two exceptio or facilities furr nit in which it is rate column. rate charged k at your cable separate charg	criber) i that are ons: you hished to usually by the c system ge was n	nformation w not offered in do not need to o nonsubscrib billed. If any r able system furnished on nade or estab	vith respect combinatio o give rate i ers. Rate in ates are cha for each of offered du	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou	ndary trans cerning (1) d include b able per-pro e services unting peri	smission services oth the ogram basis, listed. iod that were not		
Services Other Than Secondary Iransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r Block 2: List any services the	ate (not subs- hose services i re two exceptio or facilities furr- nit in which it is rate column. rate charged k hat your cable separate charg otion and includ	criber) i that are ons: you nished to usually by the c system ge was n de the ra	nformation w not offered in do not need to o nonsubscrib billed. If any r able system furnished on nade or estab	vith respect combinatio o give rate i ers. Rate in ates are cha for each of offered du	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou	ndary trans cerning (1) d include b able per-pro e services unting peri	smission services ooth the ogram basis, listed. iod that were not form of a		
Services Other Than Secondary Iransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r Block 2: List any services the listed in block 1 and for which a	ate (not subs hose services i re two exceptio or facilities furr hit in which it is rate column. rate charged b hat your cable separate charg otion and includ BLO	criber) i that are ins: you nished to usually by the c system ge was n de the ra CK 1	nformation w not offered in do not need to nonsubscrib billed. If any r able system furnished or nade or estab te for each.	vith respec combinatio o give rate i ers. Rate in ates are char for each of offered du ished. List t	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou these other serv	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the	smission services oth the ogram basis, listed. iod that were not		
Services Other Than Secondary 'ransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r Block 2: List any services th listed in block 1 and for which a brief (two- or three-word) descrip	ate (not subs- hose services i re two exceptio or facilities furr- nit in which it is rate column. rate charged k hat your cable separate charg otion and includ	criber) i that are ins: you nished to usually by the c system ge was n de the ra CK 1 CATEC	nformation w not offered in do not need to o nonsubscrib billed. If any r able system furnished on nade or estab	vith respec combinatio o give rate i ers. Rate in ates are char for each of offered du ished. List f	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the	smission services ooth the ogram basis, listed. iod that were not form of a BLOCK 2		
Services Other Than Secondary Transmissions:	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r Block 2: List any services the listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE	ate (not subs hose services i re two exceptio or facilities furr hit in which it is rate column. rate charged b hat your cable separate charg otion and includ BLO	criber) i that are ins: you hished to usually by the c system ge was n de the ra CK 1 CATEC Installa	nformation w not offered in do not need to billed. If any r able system furnished of nade or estab te for each.	vith respec combinatio o give rate i ers. Rate in ates are char for each of offered du ished. List f	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou these other serv	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the CATEGC	smission services ooth the ogram basis, listed. iod that were not form of a BLOCK 2		
Services Other Than Secondary Fransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r Block 2: List any services th listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	ate (not subs hose services i re two exceptio or facilities furr hit in which it is rate column. rate charged b hat your cable separate charg otion and includ BLO	criber) i that are ins: you hished to usually by the c system ge was n de the ra CK 1 CATEC Installa • Mot	nformation w not offered in do not need to billed. If any r able system furnished of nade or estab te for each.	vith respec combinatio o give rate i ers. Rate in ates are char for each of offered du ished. List f	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou these other serv	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the CATEGC Video or	smission services ooth the ogram basis, listed. iod that were not form of a <u>BLOCK 2</u> ORY OF SERVICE	RATE	
Services Other Than Secondary Fransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for n not covered in space E, that is, t service for a single fee. There an furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard n Block 2: List any services th listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	ate (not subs hose services re two exceptio or facilities furr hit in which it is rate column. rate charged b hat your cable separate charg btion and includ BLO RATE	criber) i that are ins: you nished to usually by the c system ge was n de the ra CK 1 CATEC Installa • Moi • Cor	nformation w not offered in do not need to billed. If any r able system furnished on nade or estab ite for each.	vith respec combinatio o give rate i ers. Rate in ates are char for each of offered du ished. List f	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou these other serv	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the CATEGO Video or Service	smission services ooth the ogram basis, listed. iod that were not form of a <u>BLOCK 2</u> DRY OF SERVICE	RATE \$0-\$10	
Services Other Than Secondary Fransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There al furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r Block 2: List any services th listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	ate (not subs hose services re two exceptio or facilities furr hit in which it is rate column. rate charged b hat your cable separate charg btion and includ BLO RATE	criber) i that are ins: you nished to usually by the c system ge was n de the ra CK 1 CATEC Installa • Mol • Cor • Pay	nformation w not offered in do not need to billed. If any r able system furnished or nade or estab te for each.	vith respect combinatio o give rate i ers. Rate in ates are cha for each of offered du ished. List f RVICE sidential	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou these other serv	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the CATEGC Video or Service A Credit M	smission services ooth the ogram basis, listed. iod that were not form of a BLOCK 2 DRY OF SERVICE Demand Activation Fee	RATE \$0-\$10 \$0-\$3	
Services Other Than Secondary Fransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There al furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r Block 2: List any services th listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection	ate (not subs hose services re two exceptio or facilities furr hit in which it is rate column. rate charged b hat your cable separate charg btion and includ BLO RATE	criber) i that are ins: you nished to usually by the c system ge was n de the ra CK 1 CATEC Installa • Mor • Pay • Pay	nformation w not offered in do not need to billed. If any r able system furnished or nade or estab te for each.	vith respect combinatio o give rate i ers. Rate in ates are cha for each of offered du ished. List f RVICE sidential	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou these other serv	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the CATEGC Video or Service of Credit M Dispatch	smission services ooth the ogram basis, listed. iod that were not form of a <u>BLOCK 2</u> ORY OF SERVICE Demand Activation Fee anagement Fee	RATE \$0-\$10 \$0-\$3 \$0-\$44	
Services Other Than Secondary Fransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There al furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r Block 2: List any services th listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection • Burglar protection	ate (not subs hose services re two exceptio or facilities furr hit in which it is rate column. rate charged b hat your cable separate charg btion and includ BLO RATE	criber) i that are ins: you hished to usually by the c system je was n de the ra CK 1 CATEC Installa • Cor • Pay • Fire	nformation w not offered in do not need to billed. If any r able system furnished or hade or estab te for each. GORY OF SEF ation: Non-re tel, hotel mmercial v cable v cable-add'l c	vith respect combinatio o give rate i ers. Rate in ates are char for each of offered du ished. List f RVICE sidential	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou these other serv	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the CATEGC Video or Service of Credit M Dispatch	smission services ooth the ogram basis, listed. iod that were not form of a <u>BLOCK 2</u> ORY OF SERVICE Demand Activation Fee an agement Fee o on Demand Receiver	RATE \$0-\$10 \$0-\$3 \$0-\$44 \$9 \$0 - \$4	
Services Other Than Secondary Transmissions:	SERVICES OTHER THAN SEC In General: Space F calls for r not covered in space E, that is, t service for a single fee. There al furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard r Block 2: List any services th listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential	ate (not subs hose services i re two exceptio or facilities furr hit in which it is rate column. ate charged k at your cable separate charg otion and includ <u>BLO</u> <u>RATE</u> \$5-\$199	criber) i that are ins: you hished to usually by the c system ye was n de the ra CK 1 CATEC Installa • Mol • Cor • Pay • Fire • Bur	nformation w not offered in do not need to billed. If any r able system furnished or nade or estab ite for each. GORY OF SEF ation: Non-re tel, hotel mmercial v cable cable-add'l c protection	vith respect combinatio o give rate i ers. Rate in ates are char for each of offered du ished. List f RVICE sidential	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou these other serv	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the CATEGC Video or Service J Credit M Dispatch Wireless HD Prem	smission services ooth the ogram basis, listed. iod that were not form of a <u>BLOCK 2</u> ORY OF SERVICE Demand Activation Fee an agement Fee o on Demand Receiver	RATE \$0-\$10 \$0-\$3 \$0-\$44 \$9 \$0 - \$4 \$1	
Services Other Than Secondary Fransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for n not covered in space E, that is, t service for a single fee. There al furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard n Block 2: List any services the listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential • First set	ate (not subs hose services i re two exceptio or facilities furr hit in which it is rate column. ate charged k at your cable separate charg otion and includ BLO RATE \$5-\$199	criber) i that are ins: you hished to usually by the c system ye was n de the ra CK 1 CATEC Installa • Moi • Cor • Pay • Fire • Bur Other s	nformation w not offered in do not need to billed. If any r able system furnished or nade or estab ite for each. GORY OF SEF ation: Non-re tel, hotel mmercial v cable v cable-add'l c protection glar protection	vith respect combinatio o give rate i ers. Rate in ates are char for each of offered du ished. List f RVICE sidential	n with any seco nformation cond formation shoul arged on a varia f the applicable uring the accou these other serv	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the CATEGC Video or Service J Credit M Dispatch Wireless HD Prem	smission services ooth the ogram basis, listed. iod that were not form of a <u>BLOCK 2</u> ORY OF SERVICE DEMAND Activation Fee anagement Fee o on Demand Receiver nium Tier grade Fee	RATE \$0-\$10 \$0-\$3 \$0-\$44 \$9 \$0 - \$4 \$1 \$10	
Services Other Than Secondary Fransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for n not covered in space E, that is, t service for a single fee. There al furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard n Block 2: List any services the listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	ate (not subs hose services i re two exceptio or facilities furr hit in which it is rate column. ate charged k at your cable separate charg otion and includ BLO RATE \$5-\$199	criber) i that are ins: you hished to usually by the c system ge was n de the ra CK 1 CATEC Installa • Mol • Cor • Pay • Fire • Bur Other s	nformation w not offered in do not need to billed. If any r able system furnished or nade or estab ite for each. CORY OF SEF ation: Non-re tel, hotel mmercial cable cable-add'l c protection glar protection services:	vith respect combinatio o give rate i ers. Rate in ates are char for each of offered du ished. List f RVICE sidential	n with any seconformation cond formation shoul arged on a varia f the applicable uring the account these other server RATE	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the CATEGC Video or Service J Credit M Dispatch Wireless HD Prem DVR Upg Vacation	smission services ooth the ogram basis, listed. iod that were not form of a <u>BLOCK 2</u> ORY OF SERVICE DEMAND Activation Fee anagement Fee o on Demand Receiver nium Tier grade Fee	RATE \$0-\$10 \$0-\$3 \$0-\$44 \$9 \$0 - \$4 \$10 \$10 \$	
Services Other Than Secondary 'ransmissions:	SERVICES OTHER THAN SEC In General: Space F calls for n not covered in space E, that is, t service for a single fee. There at furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard n Block 2: List any services the listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	ate (not subs hose services i re two exceptio or facilities furr hit in which it is rate column. ate charged k at your cable separate charg otion and includ BLO RATE \$5-\$199	criber) i that are ins: you hished to usually by the c system ge was n de the ra CK 1 CATEC Installa • Mol • Cor • Pay • Fire • Bur Other s • Rec	nformation w not offered in do not need to billed. If any r able system furnished of nade or estab te for each. GORY OF SER ation: Non-re tel, hotel nmercial cable cable-add'l c protection glar protection services: connect	vith respect combinatio o give rate i ers. Rate in ates are char for each of offered du ished. List f RVICE sidential	n with any seconformation cond formation shoul arged on a varia f the applicable uring the account these other server RATE	ndary trans cerning (1) d include b able per-pro- e services unting peri- rices in the CATEGC Video or Service A Credit M Dispatch Wireless HD Prem DVR Upg Vacation Program	smission services ooth the ogram basis, listed. iod that were not form of a <u>BLOCK 2</u> ORY OF SERVICE Demand Activation Fee anagement Fee on Demand Receiver ium Tier grade Fee hold	RATE \$0-\$10 \$0-\$3 \$0-\$44 \$9 \$0 - \$4 \$10 \$10 \$	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 62982 Name PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under PCC rules and regulations in effect on June 24, 1981, permitting the acrigage of carling in network programs [sections 76.59 (4)(2) and (4), 76.61 (e)(2) and (4), 76.63 (referring to 76.61 (e)(2) and (4)); and (2) carlain stations carried on a substitute program basis, as explained in the next paragraph. G Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, ear qualitons, or authorizations: • 0 on tils the station here, and also in space I, the station was carried both on a substitute basis and also on some other basis. FOR "UNET+2". Simulcast streams must be reported in column 1 (list each stream separately); for example wETA-simulicast). FOL Intellist the station is a sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast istream associated with a station scoreding to its over-the-air designation. For example, report multi- cast stream associated with a station is a network station, an independent station, or a noncommercial educational station, by eriting the station. Character area, (Le ⁻ distant), eath "Yes". If not, effect Yes, For cubic relation with your cable system carried the station. FOL independent). Taw For the meaning of these terms, see page (V) of the general instructions located in the paper SA3 form. Column 2: If the station is output the station is a network station, an independent station, on ano- planation of local service area, Le ⁻ divo an
Primary Transmittres: TELEVISION in General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the facings of cartain network programs [sections 76:59(1(2)) and (4), 76:63 (referring to 76:63 (refering to 76:63 (referring to 76:63 (refering to 76:63 (referring
In General: In space G, identify every television station (including translator stations and low power television stations) started by your cable system during the accounting period, except (1) stations carried only on a part-time basis under 75C rules and regulations in effect on June 24, 1981, permitting the focal relation except (2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.63 (
Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. CC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE (If Distant) 6. LOCATION OF STATION SIGN 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE (If Distant) 6. LOCATION OF STATION KNPB/KNPBHD 5/1005 E No Reno, NV See instruction additional info on alphabetizz KOLO/KOLOHD 8/1008 N No Reno, NV See instruction additional info on alphabetizz
CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE 6. LOCATION OF STATION KNPB/KNPBHD 5/1005 E No Reno, NV KNSN/KNSNHD 21/1021 I No Reno, NV KOLO/KOLOHD 8/1008 N No Reno, NV
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 2. B'CAST OF OF (Yes or No) CARRIAGE 6. LOCATION OF STATION KNPB/KNPBHD 5/1005 E No Reno, NV See instruction additional info on alphabetizz
KNSN/KNSNHD 21/1021 I No Reno, NV See instruction additional information on alphabetize KOLO/KOLOHD 8/1008 N No Reno, NV additional information on alphabetize
KOLO/KOLOHD 8/1008 N No Reno, NV additional info on alphabetiza
KOLO/KOLOHD 8/1008 N No Reno, NV additional info
KREN/KRENHD 27/1027 I No Reno, NV
KRNV/KRNVHD 4/1004 N No Reno, NV
KRXI/KRXIHD 11/1011 I No Reno, NV
KTVN/KTVNHD 2/1002 N No Reno, NV

LEGAL NAME OF OW	NER OF CABLE SY	/STEM:			SYSTEM ID#	
Nevada Bell Te	elephone Co	mpany			62982	Name
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
carried by your cable FCC rules and regula	system during t tions in effect of	he accounting n June 24, 19	g period, except 81, permitting th	(1) stations carrie ne carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections	G
76.59(d)(2) and (4), 7 substitute program ba		., .	-	1(e)(2) and (4))]; a	and (2) certain stations carried on a	Primary Transmitters:
	· ·		•••	s carried by your c	able system on a substitute program	Television
basis under specifc F				e Special Statem	ent and Program Log)—if the	
station was carried			t it in space i (ii			
	nformation cond				ute basis and also on some other f the general instructions located	
		-			s such as HBO, ESPN, etc. Identify	
			•	0	tion. For example, report multi- n stream separately; for example	
WETA-simulcast).					readant coparatoly, for oxample	
			•		on for broadcasting over-the-air in may be different from the channel	
on which your cable s			alillei 4 ili vvasi		may be different norm the charmer	
					ependent station, or a noncommercial ast), "I" (for independent), "I-M"	
· ·	, · · · · ·			•	ommercial educational multicast).	
For the meaning of the Column 4: If the st			-		es". If not, enter "No". For an ex-	
planation of local serv						
			-	-	stating the basis on which your tering "LAC" if your cable system	
carried the distant sta		•	۰.		5 7 7	
					v payment because it is the subject stem or an association representing	
-				•	ry transmitter, enter the designa-	
· · · /					her basis, enter "O." For a further	
					d in the paper SA3 form. / to which the station is licensed by the	
				-	which the station is identifed.	
Note: If you are utilizin	ng multiple chai		•		channel line-up.	
		CHANN	EL LINE-UP	AB		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	NUMBER	STATION		(II Distant)		

								SYSTEM ID#				
Name	LEGAL NAME OF							62982				
	Nevada Bel	i reiehuoue		paily				02902				
Н	PRIMARY TRANSMITTERS: RADIO In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period.											
Primary Transmitters: Radio	 Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). 											
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION				
			·									

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM I	NG PERIOD: 2021/1								
Nevada Bell Telephone Company 629	2 ^{Name}								
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on									
substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.									
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE	Carriage: Special								
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?									
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.									
2. LOG OF SUBSTITUTE PROGRAMS									
In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program.									
Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in									
the case of Mexican or Canadian stations, if any, the community with which the station is identified).									
Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."									
Column 6: State the times when the substitute program was carried by your cable system. List the times accurately									
to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m."									
Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required									
to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro									
gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.									
SUBSTITUTE PROGRAM WHEN SUBSTITUTE CARRIAGE OCCURRED 7. REASO FOR	N								
1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES DELETIC Yes or No CALL SIGN 4. STATION'S LOCATION AND DAY FROM TO									
	_								
Image: state stat									
Image: second									

	PERIOD: 2021/1									A3E. PAGE 6.
Name	LEGAL NAME OF								SY	8TEM ID# 62982
		reiehiioiie	Company							UZJOZ
J Part-Time Carriage Log	time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.									
	DATES AND HOURS OF PART-TIME CARRIAGE									
	CALL SIGN	WHEN	I CARRIAGE OCC		CALL SIGN	WHEN	N CARRIAGE OC	CURR	ED	
	CALL SIGN	DATE	HOI FROM	JRS TO		CALL SIGN	DATE	HC FROM	URS	то
			-	-					_	
									_	
									_	
				-					-	
				-						
				_					_	
									_	
				_						
				-					-	
				-	_				<u> </u>	
									<u> </u>	
				_					_	
				_]				_	
				-					_	
				-					-	
				-					-	
									-	
				-					-	
				_					_	
				_	1				_	
				_					_	
				_					_	
				_					_	
					I					

	SA3E. PAGE 7.		
		SYSTEM ID# 62982	Name
Nev	vada Bell Telephone Company	02902	
Inst all a (as pag	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount you pay. E amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transidentifed in space E) during the accounting period. For a further explanation of how to compute this period in 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.	smission service	K Gross Receipts
 Instru Con Con If you If you If you 	YRIGHT ROYALTY FEE Juctions: 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 D ompanying this form and attach the schedule to your statement of account.		L Copyright Royalty Fee
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered o ck 3 below.	n line 1 of	
• •	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on elow.	line 2 in block	
▶ If pa	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be ente block 4 below.	red on line	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are require least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 p system's gross receipts for the accounting period.		
	Line 1. Enter the amount of gross receipts from space K \$	2,884,499.45	
	Enter the result here. \$	30,691.07	
		00,001.07	
2	 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 m "Yes" in this block. Did your cable system carry any distant television stations during the accounting period? Yes—Complete the DSE schedule. Ino—Leave block 3 below blank and complete line Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 	ust check	
Block 3	4, or part 9, block A of the DSE schedule. If none, enter zero		
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00	
	Line 3. Add lines 1 and 2 and enter \$	-	
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	30,691.07	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.	0.00	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	additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here \$	31,416.07	appropriate form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i general instructions located in the paper SA3 form for more information.)	i) of the	

ACCOUNTING PERIO		FORM SA3E. PAGE 8
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Nevada Bell Telephone Company	SYSTEM ID: 62982
		0200
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast s 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	tations 14
	system carried television broadcast stations	
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	593
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED : (Identify an individual we can contact about this statement of account.)	
Be Contacted for Further Information	Name Myriam Nassif Telephone	310-964-1930
	Address 2260 E Imperial Hwy Room 839 (Number, street, rural route, apartment, or suite number)	
	El Segundo, CA 90245 (City, town, state, zip)	
	Email mn112s@att.com Fax (optional)	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regul	ations.)
Certifcation	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B	; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable s in line 1 of space B and that the owner is not a corporation or partnership; or	ystem as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own in line 1 of space B.	er of the cable system
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	l herein
	/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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus comp	
	Typed or printed name: Michael Santogrossi	
	Title: Vice President – Finance (Title of official position held in corporation or partnership)	
	Date: August 24, 2021	
Privacy Act Notice	: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying informatior	n (PII) requested on th
form in order to proc numbers. By providi search reports prep	ress your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name ing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office ¹ ared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and f statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of lay	, address and telephon s public indexes anc

U.S. Copyright Office

FORM SA3E. PA	AGE9.
---------------	-------

LEGAL NAME OF OWNER OF CABLE SYSTEM: Nevada Bell Telephone Company	SYSTEM ID# 62982	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 lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable syste service of providing secondary transmissions of primary broadcast transmitters, the system s scribers and amounts collected from subscribers receiving secondary transmissions pursuant	em for the basic shall not include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general in paper SA3 form.	nstructions in the	Concerning Gross Receipt Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for second made by satellite carriers to satellite dish owners?	dary transmissions	Exclusion
XNO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late paymer For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA		Q
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment	A3 form.	Q Interest Assessment
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment		
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment	A3 form.	
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment	x	
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment	A3 form. x xdays 	
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment	A3 form. x xdays 	
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment	A3 form. x x x x days - x 0.00274 - (interest charge)	
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment	A3 form. x x x x days - x 0.00274 - (interest charge)	
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment	A3 form. x xdays x 0.00274 (interest charge) er assistance please	
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment	A3 form. x xdays x 0.00274 (interest charge) er assistance please	
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment	A3 form. x xdays x 0.00274 (interest charge) er assistance please	
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA Line 1 Enter the amount of late payment or underpayment	A3 form. x xdays x 0.00274 (interest charge) er assistance please	

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 filing, a determination that would be made by a court of law.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

• Independent: its type-value is	1.00
• Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25

Note that local stations are not counted at all in computing DSEs.

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.

2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.

3) A station of the same type substituted for a carried network, 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 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.

DSE SCHEDULE. PAGE 11.

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

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

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

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

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

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

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

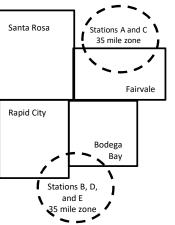
Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

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

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

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

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



	STATION	DSE	CITY	OUTSIDE LO	CAL	GRO	SS RECEIPTS
nin	A (independent)	1.0		SERVICE AR	EA OF	FROM S	UBSCRIBERS
s	B (independent)	1.0	Santa Rosa	Stations A, B,	C, D ,E		\$310,000.00
)-	C (part-time)	0.083	Rapid City	Stations A an	d C		100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A an	d C		70,000.00
	E (network)	<u>0.25</u>	Fairvale	Stations B, D	and E		120,000.00
	TOTAL DSEs	2.472		TOTAL GRO	SS RECEIPTS		\$600,000.00
	Minimum Fee Total Gross	Receipts		\$600,000.00			
				x .01064			
L				\$6,384.00			
	First Subscriber Group		Second Subso	riber Group		Third Subscriber Group	
	(Santa Rosa)		(Rapid City and	l 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 .010	64 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 .007	01 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

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	STEM ID#						
1	Nevada Bell Telephone	Company				62982						
	SUM OF DSEs OF CATEGOR		NS:									
	 Add the DSEs of each station Enter the sum here and in line 		s schedule.		0.00							
	Instructions: In the column headed "Call S	ructions: e column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5										
Computation	of space G (page 3).	ace G (page 3).										
		ne column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- cial educational station, give the DSE as ".25."										
Category "O"		CATEGORY "O" STATIONS: DSEs										
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
Add rows as												
necessary.												
Remember to copy all formula into new												
rows.												
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
				I	1							

DSE SCHEDULE. PAGE 12.

	LEGAL NAME OF	OWNER OF CABLE SYSTEM:					S	YSTEM ID#			
Name	Nevada Bell	Nevada Bell Telephone Company 62982									
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 be carried our Column 9 give the type- Column 9	CAPACITY st the call sign of all dista 2: For each station, give t correspond with the infor 3: For each station, give t 4: Divide the figure in colu at least to the third decir 5: For each independent value as ".25." 5: Multiply the figure in colu point. This is the station's	he number of hours mation given in spa he total number of h umn 2 by the figure i mal point. This is the station, give the "typ lumn 4 by the figure	your cable system ce J. Calculate on nours that the stati n column 3, and g e "basis of carriage e-value" as "1.0."	n carried the sta ly one DSE for e on broadcast ov ive the result in e value" for the s For each netwo give the result in	tion during the accountine each station. ver the air during the acc decimals in column 4. T station. rk or noncommercial ed n column 6. Round to no	ounting period. his figure must ucational station, bless than the				
Capacity		С	ATEGORY LAC	STATIONS: (COMPUTATI	ON OF DSEs					
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEI	JRS O ED BY S	UMBER F HOURS TATION N AIR	4. BASIS OF CARRIAG VALUE			SE			
			÷ 			×					
			÷ ÷			x x	=				
						x	=				
			÷	=							
			÷ +	=		x x	=				
			÷	=		×	=				
	Add the DSEs	S OF CATEGORY LAC S of each station. Im here and in line 2 of p		e,		0.00					
4 Computation of DSEs for Substitute- Basis Stations	Was carried tions in effe Broadcast of space I). Column 2: at your option. Column 3: Column 4:	te the call sign of each st d by your system in subst act on October 19, 1976 (one or more live, nonnetw For each station give the This figure should corre: Enter the number of days Divide the figure in colun This is the station's DSE	itution for a program as shown by the let ork programs during number of live, non spond with the inform s in the calendar yea an 2 by the figure in	n that your system ter "P" in column 7 that optional carrie network programs mation in space I. ar: 365, except in a column 3, and giv	was permitted t of space I); and age (as shown by s carried in subs a leap year. e the result in co	to delete under FCC rule d r the word "Yes" in columr titution for programs tha olumn 4. Round to no le	2 of t were deleted ss than the third	orm).			
		SU	BSTITUTE-BAS	IS STATIONS	: COMPUTA	TION OF DSEs					
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE			
		-		=				=			
		: :		=							
		+	-	=				=			
				=				=			
	Add the DSEs	oF SUBSTITUTE-BAS of each station. Im here and in line 3 of p	IS STATIONS:	e,		0.00					
5		ER OF DSEs: Give the am s applicable to your syster		s in parts 2, 3, and	4 of this schedule	e and add them to provide	e the total				
Total Number		f DSEs from part 2 ●			I	•	0.00				
of DSEs		f DSEs from part 3 ●			<u>!</u>		0.00				
	3. Number c	f DSEs from part 4 ●			I	·	0.00				
	TOTAL NUMBE	R OF DSEs				>		0.00			

DSE SCHEDULE. P	AGE 13.							ACCOUNTIN	g Period: 2021/:
LEGAL NAME OF C							S	YSTEM ID#	Nama
Nevada Bell T	elephone Com	pany						62982	Name
Instructions: Bloo In block A:	ck A must be comp	leted.							•
schedule.				of the DSE sched	ule blank and	complete part	8, (page 16) of th	e	6
 If your answer if 	"No," complete blo	cks B and C		ELEVISION M					Computation of
		utside of all r		ler markets as defi		tion 76.5 of FC	CC rules and regul	ations in	3.75 Fee
effect on June 24,		oobodulo F							
	plete blocks B and			LETE THE REMA		ART 6 AND 7.			
		BLO	CK B: CARR		MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulations of the second se	ons prior to Jun dule. (Note: Th	part 2, 3, and 4 of le 25, 1981. For fu e letter M below re Act of 2010.)	ther explanati	ion of permitte	d stations, see the		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric	les and regu ed pursuant t on as defined al educationa	lations cited be to the FCC man d in 76.5(kk) (7 al station [76.59	sis on which you ca elow pertain to thos ket quota rules [76 6.59(d)(1), 76.61(e 9(c), 76.61(d), 76.6	e in effect on 5.57, 76.59(b),)(1), 76.63(a) 3(a) referring	June 24, 1981 76.61(b)(c), 7 referring to 76 to 76.61(d)]	6.63(a) referring to	D	
	instructions fo E Carried pursua *F A station pre-	r DSE sched ant to individ viously carrie IHF station w	lule). ual waiver of F(ed on a part-tim /ithin grade-B c	e or substitute bas ontour, [76.59(d)(5	is prior to Jun	e 25, 1981)]	
Column 3:		e stations ide	entified by the le	parts 2, 3, and 4 c etter "F" in column :			orksheet on page ?	14 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	
				I	<u> </u>	l		0.00	
		E	BLOCK C: CC		- 3.75 FEE		L		
Line 1: Enter the	total number of							-	
	sum of permitte							-	
	' I'm a O farana I'm a 4	T L:-:-4L-	4-4-1		4- 4 0 7C -				
				of DSEs subject 7 of this schedule		ate.		0.00	
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				<u> </u>	375	Do any of the DSEs represen
Line 5: Multiply li	ne 4 by 0.0375 a	and enter su	ım here						partially permited/ partially
Line 6: Enter tota	al number of DSE	Es from line	3				x	-	nonpermitted carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 an	d enter her	e and on line	2, block 3, space	L (page 7)			0.00	
				, s., opuoo	\r~g~'/				

DSE SCHEDULE.	PAGE	13.	(CONTINUED)

	F OWNER OF CABLE I Telephone Con						5	YSTEM ID# 62982	Name
		BLOCK	A: TELEVI	SION MARKET	S (CONTIN	UED)			
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
						H			1

								C		DULE. PAGE 14.
Name	LEGAL NAME OF OW								S	YSTEM ID#
Humo	Nevada Bell Te	elephone Co	mpany							62982
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	sputating te DSE edule for rmittedColumn 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, 19 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections									
		DEDMITTE								
	1. CALL	2. PRIO		COUNTING		4. BASIS OF	1	RESENT	6 P	ERMITTED
	SIGN	2. FRIO		ERIOD		CARRIAGE		DSE	0. F	DSE
				-						
					•••••					
					•••••					
		•••••••••••••••••••••••••••••••••••••••								
					•••••					
					•••••					
7	Instructions: Block /	A must be com	pleted.							
Computation	In block A:	"Voo " oomoloi	to blocks P and C	holow						
Computation of the			te blocks B and C bcks B and C blan		e na	art 8 of the DSE sched	hule			
		NU, leave bit								
Syndicated			BLOCK	A: MAJOR		ELEVISION MARK	EI			
Exclusivity Surcharge	 Is any portion of the 	cable system wi	thin a ton 100 mai	or television ma	arke	t as defned by section	76 5 of ECC	rules in effect	lune 24	19812
Guichaige		-							June 24,	1901:
	Yes—Complete	e blocks B and	С.			X No—Proceed to	part 8			
	BLOCK B: Ca	arriage of VHF/	Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	pt DSEs	3
	Is any station listed ir				1	Was any station listed	in block B	of part 7 carrie	ed in any	commu-
	commercial VHF stat		a grade B contou	r, in whole		nity served by the cab		prior to March 3	31, 1972	? (refer
	or in part, over the ca					to former FCC rule 76	,			
			its appropriate per	mitted DSE		Yes—List each st			ate permi	tted DSE
	X No—Enter zero a	and proceed to p	art 8.			X No—Enter zero a	nd proceed t	o part 8.		
	CALL SIGN	DSE	CALL SIGN	DSE	1	CALL SIGN	DSE	CALL SIG	N	DSE
	GALL SIGN	JUC		DOL	$\ $	GALL SIGN	DOC	CALL SIG		DOL
		••••••••••••••••••••••••••••••••••••••			$\ $					
		••••••••••••••••••••••••••••••••••••••			$\ $					
					$\ $					
					$\ $					
		-			$\ $					
		••••••••••••••••••••••••••••••••••••••			$\ $					
		••••••••••••••••••••••••••••••••••••••			$\ $					
		└────┤		0.00	$\ $		ļ ļ		-	0.00
		L	TOTAL DSEs	0.00	1			TOTAL DS	ES	0.00

DSE SCHEDULE.	PAGE15.
---------------	---------

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: SYS Nevada Bell Telephone Company	TEM ID# 62982	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7) 2,884	1,499.45	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 any	y portion of the cable system within a top 50 television market as defined by the FCC?		
	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. 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.		
	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)		
	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		
	I		

ACCOUNTING PERIOD	1		HEDULE. PAGE 16.
Name	-	ME OF OWNER OF CABLE SYSTEM: Nevada Bell Telephone Company	SYSTEM ID# 62982
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	
8 Computation of Base Rate Fee	You mi 6 was • In blo • If you • If you blank What i	ctions: uust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A c checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B c. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribe bocated within that station's local service area and others were located outside that area. For the definition of a station's "	below
	service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	rour 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.	
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	1	Enter the amount of gross receipts from space K (page 7)	9.45
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	0.00
	Section 3	If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1). B. Enter 0.00701 of gross receipts (the amount in section 1). ▶ \$ 20,220.34	<u>-</u>
		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 	<u>-</u>
		and in block 3, line 1, space L (page 7) Base Rate Fee.	

DSE SCHEDULE. PAGE 17.

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
Neva	da Bell Telephone Company 62982	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	Computation
	(the amount in section 1) F	of Base Rate Fee
	C. Multiply line B by 3.000 and enter here ▶ \$	
	D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$	
	E. Subtract 4.000 from total DSEs	
	(the figure in section 2) and enter here	
	F. Multiply line D by line E and enter here ▶	
	G. Add lines A, C, and F. This is your base rate fee	
	Enter here and in block 3, line 1, space L (page 7)	
	Base Rate Fee	
shall in	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-	9
•	Space G. eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Ū
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of	Computation of
this ex	clusion, you must:	Base Rate Fee
First: [Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of	Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
-	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you	for Partially
must a	Iso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. er, if your cable system is wholly located outside all major television markets, complete block A only.	Distant Stations, and
How to	o Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
-	: For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Stations
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne token, the station is distant to the subscriber.)	
subscr	: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
Comp	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's ber groups.	
In each	n section:	
• Give	fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the ibers in the group.	
• lf:		
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
, .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
• Add t	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions e paper SA3 form.	
page. DSEs f	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show stual calculations on the form.	

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY	STEM ID#
Name	Nevada Bell Telephone Company	62982
	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 OWNER Nevada Bell Teleph						SY	STEM ID# 62982	Name
BI				TE FEES FOR EACH				
FIRST SUBSCRIBER GROUP COMMUNITY/ AREA 0			COMMUNITY/ AREA	SECOND	SUBSCRIBER GROUP	, 0	9	
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
		-						and
								Syndicated
		-				-		Exclusivity Surcharge
		-						for
		-						Partially
								Distant Stations
		-						
			0.00				0.00	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Gro	bup	<u>\$</u> 2,884,	499.45	Gross Receipts Second	a Group	\$	0.00	
Base Rate Fee First Gro	pup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU			FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						-		
		-						
Total DSEs			0.00	Total DSEa			0.00	
			Total DSEs Gross Receipts Fourth	Group	¢.	0.00		
	oup	<u>\$</u>	5.00		Oroup	<u>\$</u>	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				и				
Base Rate Fee: Add the Enter here and in block 3			iber group a	as shown in the boxes ab	ove.	\$	0.00	

LEGAL NAME OF OWN Nevada Bell Tele						5	62982	Name
				TE FEES FOR EACH				
COMMUNITY/ AREA	FIFTH	SUBSCRIBER GRC	0 0	COMMUNITY/ AREA	SIXTH	I SUBSCRIBER GROU	JP 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
		-						Syndicated
								Exclusivity
								Surcharge for
		-						Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First (\$	0.00	Base Rate Fee Secon		\$	0.00	
COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GRC	0 0	COMMUNITY/ AREA				
			Ŭ				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			0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes a	above.	\$		
						*		

FORM SA3E. PAGE 19.

LEGAL NAME OF OWNE Nevada Bell Telep						SI	STEM ID# 62982	Name
E				TE FEES FOR EACH				
	FIRST	SUBSCRIBER GROU				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		11	0.00	
Gross Receipts First G	roup	\$ 2,884,	499.45	Gross Receipts Secor	nd Group	\$	0.00	
0.000 1.000 ptc 1 mot 0		<u> </u>			ia oroap	Ţ		
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	SUBSCRIBER GROUP	Þ	
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 Group \$ 0.00		0.00	Gross Receipts Fourth	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			iber group a	as shown in the boxes a	above.	\$	0.00	

FORM SA3E. PAGE 19.

LEGAL NAME OF OWNER Nevada Bell Teleph						SY	STEM ID# 62982	Name
BL	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	IBER GROUP		
FIFTH SUBSCRIBER GROUP			Р		SIXTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA 0			COMMUNITY/ AREA			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						-		Base Rate Fee
		-				-		and
						-		Syndicated Exclusivity
								Surcharge
		-						for
								Partially
						=		Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
S	EVENTH	SUBSCRIBER GROU	Р		EIGHTH	SUBSCRIBER GROUP		
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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group a	as shown in the boxes ab	oove.	\$		
	, -	/						

		FORM SA3E. PAGE 20.							
Name		SYSTEM ID# 62982							
	Nevada Bell Telephone Company 6								
	BLOCK B: COMPUTATION OF SYNDICATED EXCLU	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP							
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981:								
Computation									
Base Rate Fee and									
Exclusivity Surcharge	 Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. 								
for Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using th								
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs							
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs							
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the							
	total number of DSEs for	total number of DSEs for							
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge							
	computation	computation							
	SURCHARGE First Group	SURCHARGE Second Group							
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs							
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs							
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the							
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group							
	subject to the surcharge	subject to the surcharge							
	computation								
		SYNDICATED EXCLUSIVITY							
	SURCHARGE Third Group	SURCHARGE Fourth Group							
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page								

LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 2							
	SYSTEM ID 6298							
BLOCK B: COMPUTATION OF SYNDICATED EXCLU	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP							
If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981:								
ate Fee INSTRUCTIONS: and Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of								
Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.								
Step 3: In line 3, subtract line 2 from line 1. This is the total number	er of DSEs used to compute the surcharge.							
Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.								
FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP							
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs							
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs							
Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1							
	and enter here. This is the total number of DSEs for							
	this subscriber group							
C	subject to the surcharge							
	computation							
SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY							
SURCHARGE	SURCHARGE							
First Group	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 2: Enter the Exempt DSEs							
Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1 and enter here. This is the							
	total number of DSEs for							
	this subscriber group							
	subject to the surcharge							
, ,	computation							
	SYNDICATED EXCLUSIVITY							
	SURCHARGE							
Third Group	Fourth Group							
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page								
	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981:							