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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY					
DATE RECEIVED AMOUNT					
8-28-24	\$ ALLOCATION NUMBER				

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting		2024/1				
Period						
B Owner	rate	Give the full legal name of the owner of the cable system. If the owner is a title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines if there were different owners during the accounting period, only the owner ngle statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID I	m. e accounting period should su		63029	
	LE	GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM DIRECTV, LLC				
					6302	920241
					63029	2024/1
		2260 E Imperial Hwy Room 839 El Segundo, CA 90245				
С		TRUCTIONS: In line 1, give any business or trade names used to it	•			
C	nan	nes already appear in space B. In line 2, give the mailing address of	the system, if dif	ferent from the address giv	en in spac	e B.
System	1	IDENTIFICATION OF CABLE SYSTEM:				
		MAILING ADDRESS OF CABLE SYSTEM:				
	2	(Number, street, rural route, apartment, or suite number)				
		(City, town, state, zip code)				
D	Inst	ructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	elist on pag	je 1b
Area	with	all communities.	•	·		
Served		CITY OR TOWN	STATE			
First		Miami	FL			
Community	В	elow is a sample for reporting communities if you report multiple cha	annel line-ups in S	Space G.		
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	GRP#
Sample	Alda		MD	A		1
•		ance	MD	B		2
	Geri	ing	MD	В		3

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 63029 **DIRECTV, LLC** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form **Area** of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN CH LINE UP SUB GRP# STATE Miami FL AB **First Aventura** FL 6 **AE** Community FL AΒ 1 **Bal Harbour Bay Harbor Islands** FΙ AB 1 **Big Pine Key** FL AC 4 FL **Biscayne Park** AB See instructions for **Broward Unincorporated County** FL AA 1 additional information on alphabetization. **Coconut Creek** FL AA 2 **Cooper City** FL AA 1 **Coral Gables** FL AB 1 **Coral Springs** 2 FL AA Cudjoe FL AC **Cutler Bay** FL AB Dania 2 FL AA Davie FL AA 2 **Deerfield Beach** FL AA 3 **Doral** FL AB 1 El Portal FL AB Florida City FL ΑE 6 **Fort Lauderdale** FL AA 2 Golden Beach FL AB 2 Hallandale Beach FL AA 2 Hialeah FL AB **Hialeah Gardens** FL AB 2 Hillsboro Beach FL AA Hollywood FΙ AA 2 **Homestead** FL AB Islamorada* FL AC 4 FL AB **Key Biscayne** 1 **Key Colony Beach** FL AC **Key Largo*** FL AD **Key West** FL AC 4 Lauderdale Lakes FL AA AA 2 Lauderdale-By-The-Sea FL FL 2 Lauderhill AA Lazy Lake FL AA **Lighthouse Point** FL 2 AA Marathon* FL AC 4 Margate AA FL Miami Beach FL AB 1 Miami Gardens FL AB

Miami Lakes	FL	AB	1
Miami Shores	FL	AB	1
Miami Springs	FL	AB	1
Miami-Dade Unincorporated County	FL	AB	1
Miramar	FL	AA	1
Monroe Unincorporated County	FL	AC	4
North Bay Village	FL	AB	1
North Lauderdale	FL	AA	2
North Miami	FL	AB	1
North Miami Beach	FL	AB	1 1
	FL		
Oakland Park		AA	2
Palmetto Bay	FL 	AB	1
Parkland	FL	AA	3
Pembroke Park	FL	AA	1
Pembroke Pines	FL	AA	1
Pinecrest (Dade County)	FL	AB	1
Plantation	FL	AA	2
Pompano Beach	FL	AA	2
Sea Ranch Lakes	FL	AA	2
South Miami	FL	AB	1
Southwest Ranches	FL	AA	1
Stock Island	FL	AB	4
	FL	AE	
Sunny Isles Beach Sunrise	FL FL	AE AA	6
			2
Surfside	FL	AB	1
Sweetwater	FL	AB	1
Tamarac	FL	AA	1 2
Tavernier *	FL	AC	4
Virginia Gardens	FL	AB	1
West Miami	FL	AB	1
		AB AA	1 1
West Miami West Park	FL FL	AA	1
West Miami West Park Weston	FL FL FL	AA AA	1
West Miami West Park	FL FL	AA	1 1
West Miami West Park Weston Wilton Manors	FL FL FL	AA AA	1
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Add rows as necessary.

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Name Legal Name of Owner of Cable System: SYSTEM ID#
DIRECTV, LLC 63029

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1		BLOCK 2				
	NO. OF				NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	F	RATE	CATEGORY OF SERVICE	SUBSCRIBERS		RATE
Residential:							
 Service to first set 	46,211	\$	26.00	HD Tech Fee	39,467	\$	10.00
 Service to additional set(s) 				Set-Top Box	46,904		\$0-\$15
 FM radio (if separate rate) 				Broadcast TV Surcharge	46,211	12.9	9-\$13.99
Motel, hotel							
Commercial	693	\$	20.00				
Converter							
Residential							
Non-residential							
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F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

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

LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID:	Namo
DIRECTV, LLC					63029) Italie
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
•			, ,		and low power television stations)	G
= =	d only on a part-time basis under nin network programs [sections	G				
76.59(d)(2) and (4), 76	Primary					
substitute program bas				carried by your c	able system on a substitute program	Transmitters:
basis under specifc F0		-		carried by your c	able system on a substitute program	Television
·	_			e Special Stateme	nt and Program Log)—if the	
	and also in spa	ce I, if the sta			ute basis and also on some other f the general instructions located	
in the paper SA3 fo		nian Donatr	anart ariainatian		a such as LIBO ESPN ata Idantifu	
		-	-	· -	s such as HBO, ESPN, etc. Identify ion. For example, report multi-	
			-	-	stream separately; for example	
WETA-simulcast).	e channel numh	er the ECC h	as assigned to t	the television stati	on for broadcasting over-the-air in	
			_		may be different from the channel	
	in each case w	hether the st			pendent station, or a noncommercial	
-	_				ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the	ese terms, see p	age (v) of the	e general instruc	ctions located in th	e paper SA3 form.	
				**	s". If not, enter "No". For an ex-	
planation of local servi Column 5: If you h		• . ,	•		paper SA3 form. tating the basis on which your	
-		_		-	ering "LAC" if your cable system	
carried the distant stat	-				-	
For the retransmiss	sion of a distant				payment necause it is the subject	
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	LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID:			
	DIRECTV, LLC					63029	Name		
PR	RIMARY TRANSMITTE	RS: TELEVISIO	N						
ca	rried by your cable s	system during the	ne accounting	period, except ((1) stations carrie	and low power television stations) d only on a part-time basis under ain network programs [sections	G		
	_			· ·	-	and (2) certain stations carried on a	Primary Transmitters:		
substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program									
basis under specifc FCC rules, regulations, or authorizations:									
Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.									
٠	ist the station here,	and also in spa formation cond	ace I, if the sta			tute basis and also on some other of the general instructions located			
			sign. Do not ı	eport origination	n program service	s such as HBO, ESPN, etc. Identify			
				-	_	tion. For example, report multi- h stream separately; for example			
	ETA-simulcast).	r Z . Olimaioast	otreams mast	. De reported in e	olumin i (iist cao	in stream separately, for example			
ito				_		ion for broadcasting over-the-air in may be different from the channel			
	which your cable sy	stem carried th	ne station.		,	ependent station, or a noncommercial			
	-	-				east), "I" (for independent), "I-M"			
,	r the meaning of the	,		, .	•	ommercial educational multicast). ne paper SA3 form.			
١.					**	es". If not, enter "No". For an ex-			
pla	anation of local servi Column 5: If you ha		• ,	•		e paper SA3 form. stating the basis on which your			
	ble system carried th	ne distant statio	on during the	accounting perio	d. Indicate by ent	tering "LAC" if your cable system			
ca	rried the distant stati								
of						/ payment because it is the subject stem or an association representing			
	-	•				ry transmitter, enter the designa-			
				•	•	ther basis, enter "O." For a further ed in the paper SA3 form.			
	•	_		-		y to which the station is licensed by the			
	CC. For Mexican or C				•	n which the station is identifed.			
-	Te. II you are utilizin			IEL LINE-UP		опаппетппе-ир.	_		
							-		
1.	CALL SIGN	2. B'CAST	3. TYPE OF	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
	SIGN	CHANNEL NUMBER	STATION	(Yes or No)	CARRIAGE (If Distant)				
w	SVN/WSVNHD	7/1007	I	No	(Miami, FL			
	TVJ/WTVJHD	6/1006	N	No		Miami, FL			
		0.1000					See instructions for additional information on		
							···alphabetization.		
							<u> </u>		
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			ļ						

WSVN/WSVNHD

7/1007

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No

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63029 DIRECTV. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 2. B'CAST 3. TYPE 4. DISTANT? 1. CALL 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) WAMI/WAMIHD 69/1069 ı No Hollywood, FL **WBEC** 63 Ε No Boca Raton, FL WBFS/WBFSHD I Miami, FL 33/1033 No WFOR/WFORHD 4/1004 Ν No Miami, FL WFUN-LD 48 ı No Miami, FL WGEN/WGENHD 8/1008 I Key West, FL No WHFT 45 I No Miami, FL WJAN-CD 41 ī No Miami, FL WLRN/WLRNHD Ε 17/1017 No Miami, FL 23/1023 WLTV/WLTVHD I No Miami, FL WPBT/WPBTHD Ε 2/1002 No Miami, FL WPLG/WPLGHD Ν 10/1010 No Miami, FL WPXM/WPXMHD 35/1035 ı No Miami, FL WSBS/WSBSHD 50/1050 I No Key West, FL WSCV/WSCVHD 51/1051 I No Fort Lauderdale, FL WSFL/WSFLHD 39/1039 ı No Miami, FL

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

Miami, FL

LEGAL NAME OF OWN	IER OF CARLE SY	STEM:			SYSTEM ID#			
DIRECTV, LLC	ER OF CABLE 31	STLIWI.			63029	Nama		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
carried by your cable s	system during th	ne accounting	period, except (1) stations carried	and low power television stations) only on a part-time basis under in network programs [sections	G		
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (4 sis, as explaine	4), or 76.63 (red d in the next p	eferring to 76.61 paragraph.	l(e)(2) and (4))]; a	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television		
basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the								
	and also in spa formation conc	ce I, if the sta			ite basis and also on some other the general instructions located			
Column 1: List each multicast stream	th station's call associated with	a station acc	ording to its over	er-the-air designati	such as HBO, ESPN, etc. Identify on. For example, report multi- stream separately; for example			
Column 2: Give the its community of licens	e. For example	, WRC is Cha	-		on for broadcasting over-the-air in nay be different from the channel			
	in each case v	vhether the st		-	pendent station, or a noncommercial			
(for independent multide For the meaning of the Column 4: If the st	cast), "E" (for no ese terms, see p ation is outside	oncommercial page (v) of the the local serv	educational), or e general instruc rice area, (i.e. "d	"E-M" (for noncontions located in the listant"), enter "Yes	s". If not, enter "No". For an ex-			
-	ave entered "Ye	es" in column	4, you must con	nplete column 5, st	paper SA3 form. tating the basis on which your ring "LAC" if your cable system			
carried the distant stat	ion on a part-tir	ne basis beca	use of lack of a	ctivated channel ca	, ,			
the cable system and a	a primary transr	mitter or an as	sociation repres	senting the primary	em or an association representing transmitter, enter the designa-			
explanation of these th	ree categories,	see page (v)	of the general in	nstructions located	er basis, enter "O." For a further I in the paper SA3 form. to which the station is licensed by the			
	Canadian statio	ns, if any, give	e the name of th	e community with	which the station is identifed.			
		CHANN	EL LINE-UP	AB				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
WTVJ/WTVJHD	6/1006	N	No		Miami, FL			
						- -		

WSVN/WSVNHD

7/1007

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No

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63029 DIRECTV. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AC 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) WAMI/WAMIHD 69/1069 ı No Hollywood, FL **WBEC** 63 Ε Yes 0 Boca Raton, FL WBFS/WBFSHD I 33/1033 No Miami, FL WFOR/WFORHD 4/1004 Ν No Miami, FL WFUN-LD 48 ı No Miami, FL WGEN/WGENHD 8/1008 I Key West, FL No WHFT 45 I No Miami, FL WJAN-CD 41 ı No Miami, FL WLRN/WLRNHD Ε 17/1017 Yes 0 Miami, FL 23/1023 WLTV/WLTVHD I No Miami, FL WPBT/WPBTHD Ε 2/1002 Yes 0 Miami, FL WPLG/WPLGHD Ν 10/1010 No Miami, FL WPXM/WPXMHD 35/1035 ı No Miami, FL WSBS/WSBSHD 50/1050 I No Key West, FL WSCV/WSCVHD 51/1051 ı No Fort Lauderdale, FL WSFL/WSFLHD 39/1039 ı No Miami, FL

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

Miami, FL

LEGAL NAME OF OWN	IER OF CARLE SY	STEM:			SYSTEM ID#			
DIRECTV, LLC	ER OF CABLE 31	STLW.			63029	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
carried by your cable s FCC rules and regulati	ystem during the	ne accounting n June 24, 198	period, except (31, permitting the	1) stations carried e carriage of certai	and low power television stations) only on a part-time basis under n network programs [sections nd (2) certain stations carried on a	G Primary		
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	and also in spa formation conc	ice I, if the sta			ite basis and also on some other the general instructions located			
Column 1: List each multicast stream	th station's call associated with	n a station acc	ording to its ove	er-the-air designati	such as HBO, ESPN, etc. Identify on. For example, report multi- stream separately; for example			
WETA-simulcast). Column 2: Give the	e channel numb	per the FCC h	as assigned to t	he television statio	on for broadcasting over-the-air in			
on which your cable sy	stem carried th	e station.			nay be different from the channel pendent station, or a noncommercial			
(for independent multid For the meaning of the	cast), "E" (for no ese terms, see p ation is outside	oncommercial page (v) of the the local serv	educational), or general instructice area, (i.e. "d	"E-M" (for noncon tions located in the listant"), enter "Yes	s". If not, enter "No". For an ex-			
cable system carried the carried the distant stat	ne distant statio ion on a part-tir	on during the a	accounting perioduse of lack of ac	d. Indicate by ente	ating the basis on which your ring "LAC" if your cable system apacity. payment because it is the subject			
the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	a primary transr simulcasts, also ree categories, e location of ea	mitter or an as o enter "E". If <u>y</u> see page (v) ch station. Fo	sociation repres you carried the c of the general ir r U.S. stations, I	senting the primary channel on any oth enstructions located ist the community	em or an association representing ransmitter, enter the designa- er basis, enter "O." For a further in the paper SA3 form. to which the station is licensed by the			
Note: If you are utilizing				-	which the station is identifed. hannel line-up.			
		CHANN	EL LINE-UP	AC				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
WTVJ/WTVJHD	6/1006	N	No		Miami, FL			

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63029 DIRECTV. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AD 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) WAMI/WAMIHD 69/1069 ı No Hollywood, FL **WBEC** 63 Ε Yes 0 Boca Raton, FL WBFS/WBFSHD I 33/1033 No Miami, FL WFOR/WFORHD 4/1004 Ν No Miami, FL WFUN-LD 48 ı No Miami, FL WGEN/WGENHD 8/1008 I Key West, FL No WHFT 45 I No Miami, FL WJAN-CD 41 ī No Miami, FL WLRN/WLRNHD Ε 17/1017 Yes 0 Miami, FL 23/1023 WLTV/WLTVHD I No Miami, FL WPBT/WPBTHD Ε 2/1002 No Miami, FL WPLG/WPLGHD Ν 10/1010 No Miami, FL WPXM/WPXMHD 35/1035 ı No Miami, FL

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

Key West, FL

Miami, FL

Miami, FL

Fort Lauderdale, FL

WSBS/WSBSHD

WSCV/WSCVHD

WSFL/WSFLHD

WSVN/WSVNHD

50/1050

51/1051

39/1039

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No

No

No

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LEGAL NAME OF OWN	JER OF CARLE SY	STEM:			SYSTEM ID#					
DIRECTV, LLC	ILITOI CABLE 31	STEW.			63029	Name				
PRIMARY TRANSMITTE	RS: TELEVISIO	N								
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on which your cable sy Column 3: Indicate			ation is a netwo	rk station, an inde _l	pendent station, or a noncommercial					
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		CHANN	EL LINE-UP	AD						
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					
WTVJ/WTVJHD	6/1006	N	No	, , ,	Miami, FL					

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63029 DIRECTV. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AE 2. B'CAST 3. TYPE 4. DISTANT? 1. CALL 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) WAMI/WAMIHD 69/1069 ı No Hollywood, FL **WBEC** 63 Ε No Boca Raton, FL WBFS/WBFSHD I Miami, FL 33/1033 No WFOR/WFORHD 4/1004 Ν No Miami, FL WFUN-LD 48 ı No Miami, FL WGEN/WGENHD 8/1008 I Key West, FL No WHFT 45 I No Miami, FL WJAN-CD 41 ī No Miami, FL WLRN/WLRNHD Ε 17/1017 No Miami, FL 23/1023 WLTV/WLTVHD I No Miami, FL WPBT/WPBTHD Ε 2/1002 No Miami, FL WPLG/WPLGHD Ν 10/1010 No Miami, FL WPXM/WPXMHD 35/1035 ı No Miami, FL WSBS/WSBSHD 50/1050 I No Key West, FL WSCV/WSCVHD 51/1051 ı No Fort Lauderdale, FL WSFL/WSFLHD 39/1039 ı No Miami, FL

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

Miami, FL

WSVN/WSVNHD

7/1007

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No

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#				
DIRECTV, LLC		- · - · · · ·			63029	Name			
PRIMARY TRANSMITTE	RS: TELEVISIO	N							
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(for independent multid For the meaning of the	cast), "E" (for no se terms, see p ation is outside	oncommercial page (v) of the the local serv	educational), or general instruc ice area, (i.e. "d	"E-M" (for noncon tions located in the listant"), enter "Yes	If not, enter "No". For an ex-				
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WTVJ/WTVJHD	6/1006	N	No		Miami, FL				

FORM SA3E. PAGE		OTEM			SYSTEM ID#			
DIRECTV, LL	WNER OF CABLE SY _C	SIEM:			63029	Name		
PRIMARY TRANSMI		N						
carried by your cab FCC rules and regu 76.59(d)(2) and (4) substitute program	n General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.							
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Note: If you are util	izing multiple char				hannel line-up.			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID# 63029	Name						
וט	RECTV, LLC	63029							
Ins all (as	Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)								
IM	during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	\$ 18,223,882.43 (Amount of gross receipts)							
• Co • Co • If y fee • If y	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.								
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be $\operatorname{ck} 3$ below.	entered on line 1 of							
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be el elow.	ntered on line 2 in block							
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shound block 4 below.	ıld be entered on line							
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.								
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	\$ 18,223,882.43							
	This is your minimum fee.	\$ 193,902.11							
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting perio X Yes—Complete the DSE schedule. No—Leave block 3 below blank and continued to the property of the stations of the property of the prop	n 4, you must check d?							
Block	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$ 4,630.01							
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00							
	Line 3. Add lines 1 and 2 and enter here	\$ 4,630.01							
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	\$ 193,902.11	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	\$ 194,627.11	appropriate form for submitting the additional fees.						
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form for more information.)	See page (i) of the							

ACCOUNTING PERIOD: 2024/1

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: DIRECTV, LLC	SYSTEM ID# 63029								
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations	34								
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	620								
N Individual to	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 Manassif@directv.com Fax (optional)									
0	TIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)									
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or									
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as ide in line 1 of space B and that the owner is not a corporation or partnership; or	entified								
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cab in line 1 of space B.	ole system								
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 									
	X /s/ Sara Gunther									
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility setting									
	Typed or printed name: Sara Gunther									
	Title: AVP, Financial Ops (Title of official position held in corporation or partnership)									
	Date: August 20, 2024									

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
DIRECTV, LLC	63029	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 systemer service of providing secondary transmissions of primary broadcast transmitters, the systemer services and amounts collected from subscribers receiving secondary transmissions pursuant For more information on when to exclude these amounts, see the note on page (vii) of the general in paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for second made by satellite carriers to satellite dish owners? X NO	om for the basic nall not include sub- to section 119."	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below\$		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late paymer For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA	• •	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	- (interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copy please list below the owner, address, first community served, accounting period, and ID number as gilling.	-	
Owner Address		
First community served Accounting period ID number		

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

ACCOUNTING PERIOD: 2024/1

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

- 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:

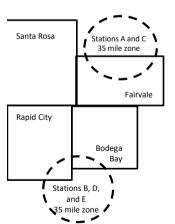
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6,384.00

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

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

1	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM I											
ı ı	DIRECTV, LLC					63029						
	SUM OF DSEs OF CATEGOR		NS:									
	Add the DSEs of each station		0.75									
	Enter the sum here and in line	0.75										
2	Instructions:											
	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).											
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."											
of DSEs for												
Category "O"			CATEGORY "O" STATION		T							
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
	WBEC	0.250										
	WLRN/WLRNHD	0.250										
	WPBT/WPBTHD	0.250										
Add rows as	***************************************											
necessary.												
Remember to copy all												
formula into new												
rows.						 						

						ļ						
						ļ						
						ļ						
1		1			1	I						

Name	DIRECTV, L	DWNER OF CABLE SYSTEM:						S	63029
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	CAPACITY st the call sign of all distar 2: For each station, give th correspond with the inform 3: For each station, give th 4: Divide the figure in colu 1: at least to the third decim 5: For each independent s value as ".25." 5: Multiply the figure in col point. This is the station's	ne number of he nation given in the total number mn 2 by the figural point. This tation, give the tumn 4 by the figuran fi	nours your cable system is space J. Calculate onling or of hours that the statio gure in column 3, and gi is the "basis of carriage or "type-value" as "1.0." I figure in column 5, and gi	carried the stati y one DSE for each on broadcast ove ve the result in convalue" for the state of For each network	on during the a ach station. er the air during decimals in colu ation. cor noncomme	the account umn 4. This f ercial education	ing period. figure must onal station, s than the	
Capacity		(CATEGORY	/ LAC STATIONS:	COMPUTAT	ION OF DS	Es		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OI CARRIAC VALUE	F	5. TYPE VALUE	6. DS	SE
			÷		=	x		=	
			÷			X		=	
			÷		=	x x		=	
			÷		=	x		=	
			÷		=	x		=	
			÷		=	x x		=	
Computation of DSEs for Substitute-Basis Stations	Instructions: Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4:	s of CATEGORY LAC S' of each station. um here and in line 2 of pa we the call sign of each state d by your system in substite ect on October 19, 1976 (a one or more live, nonnetwo For each station give the This figure should corres Enter the number of days Divide the figure in colum This is the station's DSE (art 5 of this sch ation listed in s tution for a pro as shown by the ork programs do number of live pond with the in the calenda n 2 by the figu	pace I (page 5, the Log gram that your system re letter "P" in column 7 uring that optional carria , nonnetwork programs information in space I. ar year: 365, except in a re in column 3, and give	of Substitute Prowas permitted to of space I); and ge (as shown by the carried in substitute leap year.	delete under Fiche word "Yes" in tution for progroumn 4. Round	FCC rules and column 2 of arms that were to no less the	re deleted an the third	.
		SU	IBSTITUTE	-BASIS STATION	S: COMPUTA	ATION OF F)SFs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBI OF DAY IN YEA	ER 4. DSE	1. CALL SIGN	2. NUMI OF		3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		=			÷		=
			·	=			÷		=
		+		=			÷		=
		÷		=			÷		=
	Add the DSEs	s OF SUBSTITUTE-BASI of each station. um here and in line 3 of pa	S STATIONS:	:			0.00		-
5		ER OF DSEs: Give the amount of the second se		boxes in parts 2, 3, and	4 of this schedule	e and add them	to provide the	e total	
Total Number	1. Number	of DSEs from part 2 ●				-		0.75	
of DSEs	2. Number	of DSEs from part 3 ●				<u> </u>		0.00	
	3. Number	of DSEs from part 4 ●				-		0.00	
	TOTAL NUMBE	ER OF DSEs							0.75

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2024/1

LEGAL NAME OF OV		YSTEM:					S	YSTEM ID#	Name	
DIRECTV, LLC								63029		
Instructions: Block In block A:	k A must be comp	leted.								
If your answer if " schedule.	Yes," leave the re	mainder of pa	ırt 6 and part 7	of the DSE schedu	ule blank and	complete part	8, (page 16) of the	•	6	
• If your answer if "	No," complete blo			EL EVICIONI MA	ADVETO				Computation of	
Is the cable system	located wholly ou			ELEVISION MA		tion 76.5 of FC	C rules and regula	ations in	3.75 Fee	
effect on June 24,	1981?		•	LETE THE REMAIN						
X No—Comp	lete blocks B and	C below.								
		BLO	CK B: CARR	IAGE OF PERM	/ITTED DS	Es				
Column 1: CALL SIGN	under FCC rules	and regulations e DSE Schee	ns prior to Jun dule. (Note: Th	part 2, 3, and 4 of the e 25, 1981. For fur e letter M below ref Act of 2010.)	ther explanati	on of permitted	d stations, see the	-		
Column 2: BASIS OF PERMITTED CARRIAGE	Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station. BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to									
B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7)										
	*F A station pre	viously carrie IHF station w	d on a part-tim ithin grade-B c	e or substitute basi ontour, [76.59(d)(5	•		rring to 76.61(e)(5))]		
Column 3:		e stations ide	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			rksheet on page 1	4 of		
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE		
WBEC	С	0.25								
WPBT/WPB WLRN/WLR	†	0.25 0.25								
WERROWER		0.20								
								0.75		
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE					
Line 1: Enter the	total number of I	OSEs from p	art 5 of this s	chedule						
Line 2: Enter the	sum of permitted	DSEs from	block B abov	/e						
Line 3: Subtract li (If zero, le				of DSEs subject to of this schedule)		ite.				
Line 4: Enter gros	ss receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent partially	
Line 5: Multiply lir	ne 4 by 0.0375 a	nd enter sur	n here				x		permited/ partially nonpermitted	
Line 6: Enter tota	I number of DSE	s from line (3						carriage? If yes, see part 9 instructions.	
Line 7: Multiply lir	ne 6 by line 5 and	d enter here	and on line 2	, block 3, space L	_ (page 7)			0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM: DIRECTV, LLC 63029							Name		
1. CALL	2. PERMITTED		A: TELEVIS	SION MARKETS 2. PERMITTED		JED) 1. CALL	2. PERMITTED	3. DSE	6
SIGN	BASIS		SIGN	BASIS		SIGN	BASIS		
									Computation 6
									
									
									
									

ACCOUNTING PERIOD: 2024/1

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **DIRECTV, LLC** 63029 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B. part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). Carriage B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 6. PERMITTED 3. ACCOUNTING 5. PRESENT 2. PRIOR 4. BASIS OF SIGN DSE **PERIOD** CARRIAGE DSE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the Syndicated **BLOCK A: MAJOR TELEVISION MARKET** Exclusivity Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? X Yes—Complete blocks B and C. No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN CALL SIGN CALL SIGN DSE DSE DSE DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: DIRECTV, LLC SYSTEM ID# 63029	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7)	7
Section 2	A. Enter the total DSEs from block B of part 7	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	Surcharge
• Is an	/ portion of the cable system within a top 50 television market as defned by the FCC? X Yes—Complete section 3 below. No—Complete section 4 below.	
	SECTION 3: TOP 50 TELEVISION MARKET	
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. 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.	
0.5	A. Enter 0.00599 of gross receipts (the amount in section 1)	
	B. Enter 0.00377 of gross receipts (the amount in section 1)	
	C. Multiply line B by 3.000 and enter here	
	D. Enter 0.00178 of gross receipts (the amount in section 1)	
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here	
	F. Multiply line D by line E and enter here	
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	
	SECTION 4: SECOND 50 TELEVISION MARKET	
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.	
74	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	

Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM: SYSTEM ID							
	<u> </u>	DIRECTV, LLC 6302							
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.							
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)							
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _ \$							
Surcharge		C. Multiply line B by 3.000 and enter here.							
		D. Enter 0.00089 of gross receipts (the amount in section 1)							
		E. Subtract 4.000 from the total DSEs (the figure on line C in							
		section 2) and enter here.							
		F. Multiply line D by line E and enter here							
		Enter here and on line 2, block 4, space L (page 7)							
		Syndicated Exclusivity Surcharge							
	Instru	ctions:							
8	You m	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part							
		checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.							
Computation		r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.							
of	-	r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below							
Base Rate Fee	blank What i	s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers							
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local							
	service	e area," see page (v) of the general instructions.							
		BLOCK A. CARRIAGE OF BARTIALLY DISTANT STATIONS							
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS • Did your cable system retransmit the signals of any partially distant television stations during the accounting period?								
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.							
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE							
	Section 1	Enter the amount of gross receipts from space K (page 7)							
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.							
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)▶							
	Section								
	3	If the figure in section 2 is 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) ▶							
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here							
		D. Multiply line B by line C and enter here							
		E. Add lines A, and D. This is your base rate fee. Enter here							
		and in block 3, line 1, space L (page 7)							
		Base Rate Fee							

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2024/1

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM	
DIRECTV, LLC 63	Name 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	8
(the amount in section 1) ▶\$	
B. Enter 0.00701 of gross receipts	Computation
(the amount in section 1) > _	of Base Rate Fee
C. Multiply line B by 3.000 and enter here > \$	Buss rule i se
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	00
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals s	
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in Space G.	9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	
receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of	
exclusion, 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 Syndicated
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group	Exclusivity
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge for
NOTE: 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 make the you make the you	
also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, your cable system is wholly located outside all major television markets, complete block A only.	ver, if Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations	for Partially
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you	Permitted Stations
carried to that community.	
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, b same token, the station is distant to the subscriber.)	y the
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable symbol will have only one subscriber group when the distant stations it carried have local service areas that coincide.	ystem
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber.	riber
In each section:	
• Identify the communities/areas represented by each subscriber group.	
Give 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 subscribers in the group.	
• If: 1) your evetem is lecated whelly outside all major and smaller television markets, give each station's DSE as you gave it is parts 2, 2,	and
1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, 4 of this schedule; or,	anu
any 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, part 6 of this schedule.	
• Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.	
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding	
page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the tot DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show y actual calculations on the form.	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63029 **DIRECTV, LLC** 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 DIRECTV, LLC	OF CABLE	SYSTEM:				S	YSTEM ID# 63029	Name	
Bl	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
	FIRST	SUBSCRIBER GROUP)		SECOND	SUBSCRIBER GROU	Р		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE				of	
OALL GIGIT	DOL	CALL SIGIV	DOL	CALL SIGIV	DOL	OALL SIGN	DOL	Base Rate Fee	
								and	
							 	Syndicated	
							 	Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant	
								Stations	
Total DSEs	<u> </u>		0.00	Total DSEs			0.00		
Gross Receipts First Gro	NID.	e 9.968	271.46	Gross Pagaints Sacan					
Gross Necelpts First Gro	Jup	3,300,	27 1.40	Gross Necelplis Second	Gloup	\$ 6,93	33,033.30		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00		
	THIRD	SUBSCRIBER GROUP	•		FOURTH	SUBSCRIBER GROU	Р		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				WPBT/WPBTHD	0.25				
				WBEC	0.25				
				WLRN/WLRNHD	0.25				
							···		
							··· 		
Total DSEs			0.00	Total DSEs			0.75		
Gross Receipts Third Gro	oup	\$ 464,	606.51	Gross Receipts Fourth	Group	\$ 5	17,235.99		
Base Rate Fee Third Gro	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	4,127.54		
Base Rate Fee: Add the	hase rate	e fees for each subscrib	oer aroun s	s shown in the hoves abo	ove				
Enter here and in block 3			g.oup c		•.	\$	4,630.01		

LEGAL NAME OF OWNER DIRECTV, LLC	OF CABLE	SYSTEM:				SY	STEM ID# 63029	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE				of
WBEC	0.25	0,122 0.0.1	502	07.122 0.0.1		07.122 0.011	552	Base Rate Fee
WLRN/WLRNHD	0.25							and
								Syndicated
	-							Exclusivity
								Surcharge
				-			·	for
				-			·	Partially
				-			·	Distant
	 							Stations
				·				Stations
	 			-			·	
	 				†			
					†			
	 				 			
								
	<u> </u>				<u> </u>			
Total DSEs			0.50	Total DSEs		-	0.00	
Gross Receipts First Gro	oup	\$ 94,	448.95	Gross Receipts Second	d Group	\$ 23	9,426.02	
Base Rate Fee First Gro	oup	\$	502.47	Base Rate Fee Second	d Group	\$	0.00	
5	SEVENTH	SUBSCRIBER GROU	Р		EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	 		ļ				 	
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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	
Book Both For Allin	hace	food for each 11 11	bor	on about in the last	21/2			
Enter here and in block			vei group a	as shown in the boxes ab	ove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: DIRECTV, LLC 63029								
				ATE FEES FOR EAC			LID	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ AREA 0				9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE			Computatio of	
								Base Rate Fe
	······							and Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
			·····					Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$ 9,96	8,271.46	Gross Receipts Sec	ond Group	\$ 6,9	939,893.50	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	DUP					
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thire	d Group	\$ 46	64,606.51	Gross Receipts Fou	rth Group	\$	517,235.99	
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add	I the base rat	re fees for each subs	criber group a	as shown in the boxes	above.			
Enter here and in blo			· '			\$	0.00	

		IBER GROUP	SUBSCR	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	İ
_	JP	SUBSCRIBER GROU				SUBSCRIBER GROU		
9 Computat	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicat					<u></u>			
Exclusiv					<mark></mark>			
Surchar								
for Partiall								
Distan								
Station								
							••••	
			<u> </u>					
	0.00			Total DSEs	0.00			otal DSEs
	239,426.02	\$ 2	d Group	Gross Receipts Secon	1,448.95	\$ 94	Group	ross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	ase Rate Fee First G
	JP	SUBSCRIBER GROU	EIGHTH		UP	SUBSCRIBER GROU	SEVENTH	
	0		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
				CALL SIGN				
	·····			CALL SIGN	<u></u>			
				CALL SIGN				
				CALL SIGN				
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				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
	0.00				0.00			otal DSFs
	0.00			Total DSEs	0.00			
	0.00	\$	Group		0.00	\$	Group	otal DSEs

ACCOUNTING PERIOD: 2024/1 FORM SA3E. PAGE 20 EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name DIRECTV, LLC 63029 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market of **INSTRUCTIONS:** Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge 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 Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations vour actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1

and enter here. This is the

total number of DSEs for

subject to the surcharge

computation

Fourth Group

this subscriber group

SYNDICATED EXCLUSIVITY

SURCHARGE

and enter here. This is the

total number of DSEs for

subject to the surcharge

computation

this subscriber group

SYNDICATED EXCLUSIVITY

SURCHARGE

ACCOUNTING PERIOD: 2024/1 FORM SA3E. PAGE 20 EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name DIRECTV, LLC 63029 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market of **INSTRUCTIONS:** Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge 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 Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations vour actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First 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 and enter here. This is the total number of DSEs for total number of DSEs for

this subscriber group

SYNDICATED EXCLUSIVITY

SURCHARGE

subject to the surcharge

computation

Fourth Group

this subscriber group

SYNDICATED EXCLUSIVITY

SURCHARGE

subject to the surcharge

computation

	Cable
U	Worksheet

Total amount of	Number of SAs rec'd	Initials
remittance		

		Date of remittance	☐ Check	☐ EFT ☐ FILING	3 FEES
Cable ID #				Amount	Initials
Examined by	Reviewed by	Date examination completed	Allocation number		
Space A Accounting Period					
	☐ January 1 - June 30, 2017		☐ July 1 - December 31, 2017		
	☐ Letter sent		☐ Information received		
	☐ Accepted		☐ Phone call/Date/Contact		
Space B Owner					
	☐ Letter sent		☐ Information received		
	☐ Accepted		☐ Phone call/Date/Contact		
Space D Area Served					
	☐ Letter sent		☐ Information received		
	☐ Accepted		☐ Phone call/Date/Contact		
Space E Secondary Transission					
Service Subscribers:	☐ Letter sent		☐ Information received		
and Rates	Accepted Accepted		☐ Phone call/Date/Contact		
Space G Primary Transmitters:					
Television	☐ Letter sent		\square Information received		
	Accepted		☐ Phone call/Date/Contact		
Space H Primary Transmitters:	_				
Radio	☐ Accepted		☐ Phone call/Date/Contact		

		Space I Substitute
		Carriage
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phone call/Date/Contact	
		Space J Part-time
		Carriage Log
☑ Letter sent	☐ Information received	(SA3 only)
☐ Accepted	☐ Phone call/Date/Contact	
		Space K Gross Receipts
☐ Letter sent	☐ Information received	
☐ Letter sent	☐ Phone call/Date/Contact	
		Space L Copyright Filing and Royalty Fees
☐ Royalty Fee should be	☐ Refund request to fiscal	
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phoe call/Date/Contact	
		Space M Channels
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phone call/Date/Contact	
		Space O Certification
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phone call/Date/Contact	
		Space P Statement of Gross Receipts
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phone call/Date/Contact	
		Space Q Interest Assessment
☐ Letter sent	☐ Info/add'l fee received	
☐ Accepted	☐ Phone call/Date/Contact	