

U.S. COPYRIGHT OFFICE
INSTRUCTIONS FOR THE SALES LOGS FORM - DIAL FORM
THE SALES U.S. COPYRIGHT OFFICE FORM
Email completed worksheets to:
copyright@copyright.gov

Submitting the form:

This form is effective beginning with the January 1 to June 30, 2007 accounting period (01/01-03/31). When complete, the worksheet should be signed electronically using an "X" signature (i.e., J. (John Smith) in Space C and used and submitted as a Microsoft Excel worksheet (do not .xlsx). Email the worksheet in native Excel format to the U.S. Copyright Office Learning Division at copyright@copyright.gov. Do not print and mail the worksheets to the U.S. Copyright Office. There is no need to remove the instructions tab before submitting the template by email. Do not add additional worksheets or worksheet annotations to the template before submitting as the user may cause user.

General Instructions

Abbreviation: Abbreviation is NOT required for any reason.
Excel: The form was designed for optimum use with Excel 2007 and later versions. A computer that runs Excel 2003 can be used to complete the form but, as described below, it may be necessary to bypass certain error messages.
Protection: All tabs of the SALES LOGS Form Excel spreadsheet have been protected in Excel so that the user does not accidentally edit the underlying formulas that allow the form to function properly. The form is designed to function with all tabs in protected mode. It is strongly recommended that you do not unprotect any tabs on the form.
Select the tabs you wish to view/edit. While in a tab, use the mouse to the arrow keys to navigate between fields. Depending on the settings in Excel, hitting the "TAB" button on the keyboard will not necessarily move the user to the next tab. You will have to manually move the user to include the next Excel worksheet tab.

General Data Input tab

Ensure that the pre-printed periods (i.e., Month's reporting period) of the "2007-01" next to the "ACCOUNTING PERIOD" field at the top of the page. Failure to enter the accounting period here will cause the form to not populate the correct information based on the basis of each month of the accounting period.
Select A - fill in the accounting period in local form (i.e., for 2017.01, fill in "January 1 - June 30, 2017")
Select B - If this is a system's first filing, place an "X" in the appropriate box and leave the system ID number blank. Otherwise, fill in the system ID number. If you enter additional information in the appropriate highlighted records data - in the highlighted "Filing Period" box, fill in the four digit year followed immediately by the number 1 for the January-June accounting period or the number 2 for the July-December accounting period. For 2017.01, fill in "20171". DO NOT USE A SPACE OR OTHER CHARACTERS, SUCH AS A SLASH OR DASH, BETWEEN THE YEAR AND either a one digit form.
<http://www.copyright.gov/learn/faq.html>
Select C, E, F, M, N, D - fill in all applicable information in the appropriate highlighted boxes.

Cross Receipts tab

Subscriber names:
Leave this field to name individual subscriber groups by community names or other designations may fill in the "Subscriber/Community Name" column.
Cable systems that have subscriber groups should fill in the individual subscriber group gross receipts in the "Cross Receipts" column. The "Subgroup Gross Receipt Total" box will automatically add together all entries from the "Cross Receipts" column showing users to ensure that total gross receipts equals the cumulative gross receipts of the system's subscriber groups. The form will display an "OUT OF BALANCE" error message if the "Cross Receipts" column total fails.

Notes tab

The notes tab is available for user input to provide notes or other information for the Copyright Examiner.

Signals tab

Enter the call signs, broadcast channel numbers, type of station, location of station, and enter/select what the basis of carriage is (satellite or direct) in Space G. The DSC column will be populated with the correct DSC value based on the location of the station.
If an additional Space G tab is required, use the "Continue" button to add additional Space G tabs by right clicking the "1 - Space G (JAM) tab, clicking "More or Copy", selecting "1 - Space G" from the "Before sheet" list, clicking the "1 - Space G" tab, and clicking "OK". It will add the new "1 - Space G (JAM) tab" to the spreadsheet after the "1 - Space G (JAM) tab". Remove this tab by right clicking the tab at the bottom of the screen and clicking "Remove", and clicking "OK". This will remove the highlighted content. To add more tabs, click the new "1 - Space G (JAM) tab" and click "OK". Repeat this process as necessary to add more tabs. Note: The "1 - Space G (JAM) tab" is not available for operators using the 2007 version of Excel.
Note that this tab can accommodate up to 255 stations and, if desired, can be used as a master list for multiple DSC filings. In other words, an operator may list out the signals with the signals from multiple DSC filings and copy the signal information into other Excel SALES LOGS Form signal tabs to simplify entry. Signals listed in the signals tab that are not carried on the system for which the particular form is being completed will not impact the rest of the form's calculation information as located at the end of the cover sheet form. However, see:
<http://www.copyright.gov/learn/faq.html>

Page 1 - Space A-C

Select C and E will automatically populate with information from the General Data Input tab, including a barcode. Note that the barcode will only display if the barcode font has been downloaded as described above.
Select D will automatically calculate with the information for the first community listed on the "Page 1 - Space D11" tab.

Page 1b - Space D

All communities, states, channel lineups and subline numbers can be manually entered in the highlighted area. Add ones as needed so that all communities are listed in issue D.

Page 2 - Space E-F

Blocks of both Space E and F will automatically populate with information from the General Input Data tab. Information can be manually entered on the highlighted area of Block F for both Space E and F.

Page 3 - Space G (JAM)

Fill in all of the call signs for each channel/lineup and select whether the signal is local or distant in the areas served by the broadcast channel number, type of station, basis of carriage (if the station is selected as distant and location of station) will automatically populate with information from the Signals tab.
There are 25 Space G tabs available for identifying channel lineups (JAM-AB). Unused Space G tabs may be hidden or deleted. These "1 - Space G" options are not available for operators using the 2007 version of Excel.
If additional Space G tabs are required, use the "Continue" button to add additional Space G tabs by right clicking the "1 - Space G (JAM) tab, clicking "More or Copy", selecting "1 - Space G" from the "Before sheet" list, clicking the "1 - Space G" tab, and clicking "OK". It will add the new "1 - Space G (JAM) tab" to the spreadsheet after the "1 - Space G (JAM) tab". Remove this tab by right clicking the tab at the bottom of the screen and clicking "Remove", and clicking "OK". This will remove the highlighted content. To add more tabs, click the new "1 - Space G (JAM) tab" and click "OK". Repeat this process as necessary to add more tabs. Note: The "1 - Space G (JAM) tab" is not available for operators using the 2007 version of Excel.

Page 4 - Space H

Information can be manually entered into the highlighted areas.

Page 5 - Space I

Section 1 - The "Yes" box has been checked in this section by default. The "Yes" box can be manually checked for cable systems with subscriber content.
Section 2 - Information can be manually entered into the highlighted areas where available.

Page 6 - Space J

Information can be manually entered into the highlighted areas.

Page 7 - Space K-C

Select A - the amount of areas received will automatically calculate with information from the Cross Receipts tab.
Select B - Block 1 - this area will automatically populate with information from the Cross Receipts tab and will automatically calculate the necessary tax based on that information.
Select C - Block 2 - this area will automatically calculate with information from the Cross Receipts tab.
Select D - Block 3 - the base rate fee will automatically populate with information from Part 1 (Section 3 or 4) or block 4 of the DSC schedule. The 17.5 fee will automatically calculate with information from the signals tab.
Select E - Block 4 - Line 1 will automatically populate. If the system calculates a syndicated surcharge in Part 7 or Part 8 that surcharge must be manually entered into Block 4. Block 4 will automatically calculate based on the information entered into the signals tab. The total results for Block 4 will automatically calculate based on the rest of the information.

Page 8 - Space M-Q

Select A - this area will automatically calculate with information from the General Input Data tab.
Select B - The appropriate box identifying the operator must be checked. The "Yes" (printed name) and "Yes" boxes will automatically calculate with information from the General Input Data tab.
Operator Space D - this area will be submitted with an electronic "AF" signature (i.e., John Smith). Enter an electronic signature by using "X" followed by your name in the signature box.

Page 9 - Space P-Q

Select A - The "Yes" box has been checked in this section by default. The "Yes" box may be manually checked and information may be manually entered into the highlighted areas.
Select B - If applicable, the necessary data can be manually input on Lines 1 and 2. The remaining calculations will be performed automatically. Any interest calculated in Space Q will automatically calculate on Space C, Block 4, Line 2.

Page 11 - Parts 1-2

Part 1 will automatically calculate with information from the General Input Data tab.
Part 2 - Carriage of non-permitted distant stations can be manually input into the highlighted fields. DSC values will automatically populate with information from the Signals tab. The calculation for the "Sum of DSC" box will be performed automatically based on the information entered on this tab.
Additional rows may be added to accommodate additional signals. If additional rows are added, remember to copy the DSC formulas into the new rows.

Page 12 - Parts 3-5

Parts 3 and 4 - Information can be manually entered into the highlighted areas. The calculation for the "Sum of DSC" boxes will be performed automatically based on the information entered in the DSC columns on Parts 3 and 4.
Part 5 - the calculation for the "Total Number of DSC" will be performed automatically based on the information entered into Parts 2, 3 and 4.

Page 13 - Part 6

manually check the "Yes" box.
Block B - Call signs and permitted basis of carriage can be entered into the highlighted fields. The DSC column will automatically calculate with information from the Signals tab. The total permitted DSC calculation will be performed.
Cable systems with more than 21 distant permitted stations can use the "13 - Part 6 (Continued)" tab to input additional signals. Again, the DSC values will automatically populate with information from the Signals tab. Any DSCs entered on this tab will be accounted for automatically in the permitted DSC calculation on the preceding tab.
Block C - If the sum of DSC listed in Part 5 is greater than the sum of DSC listed in Part 6, Block C will automatically populate and perform the necessary calculations for the 17.5 fee. The information in Line 1 will NOT automatically calculate based on the necessary calculations for the 17.5 fee. The information in Line 1 will NOT automatically calculate based on the necessary calculations for the 17.5 fee. The information in Line 1 will NOT automatically calculate based on the necessary calculations for the 17.5 fee. The information in Line 1 will NOT automatically calculate based on the necessary calculations for the 17.5 fee.

Page 14 - Part 7

Station carried over part time and subscriber content may be entered manually in the area at the top of this tab.
Part 7 - Block 1 - The appropriate box should be manually checked based on the location of the station.
Part 7, Blocks B and C - The "Yes" boxes have been checked by default. The "Yes" boxes in either area may be manually checked and any applicable call signs may be manually entered. The DSC columns will automatically calculate with information from the Signals tab. The "Total DSC" calculations will be performed automatically.

Page 15 - Part 7

Block D - this area will automatically calculate with information from the Cross Receipts tab and the earlier content.
Information can be manually entered into the appropriate highlighted areas on this tab and the area at the top of the tab. In the event a syndicated exclusivity surcharge is calculated in Part 7, that surcharge will NOT automatically calculate in Space C, Block 4, Line 2. The information must be entered manually on that line.

Page 16 - Part 7-B

Part 7, Block A - The "Yes" box has been checked by default. Cable systems that do not have subscriber groups should manually check the "No" box.
If the "Yes" box is manually checked, the appropriate sections of Block B will automatically populate (either on this tab or the top portion of the following "13 - Part 6 (B)" tab). The information from Part 7 and the "Base Rate Fee" calculation will be performed automatically. The information for the "Base Rate Fee" will automatically calculate on Space C, Block 3, Line 1. If any DSC information is input into the 3.75 fee portion of Part 7, Block C will calculate the calculation automatically and the 3.75 results for calculation Part 7 will be automatically calculated on Space C.

Page 19 - Part 8 (1-4)

For cable systems with subscriber content, fill in the permitted distant call lines in the appropriate subscriber area.
Permitted basis of carriage may be filled in next to the call lines in Column "Call Columns" in M and R. If applicable, the DSC column will automatically calculate with information from the Signals tab.
The "Total DSC" calculation for each subscriber group will automatically be performed based on the information entered into each subscriber area.
The "Cross Receipts" fee for each subscriber group will automatically calculate with information from the Cross Receipts tab.
The "Base Rate Fee" calculation for each subscriber group will be automatically performed.
The Total Base Rate Fee calculation throughout all subscriber groups will be automatically performed and will display on the bottom of the "19-13 - Part 8 (1)" tab. This information will automatically calculate on Space C, Block 3, Line 1. DO NOT DELETE UNLESS PART 8 IS THE TABLE. Deleting unused tabs in any part of Part 8 will cause the form to function improperly.

Page 19 - 3.75 Fee Part 9 (1-4)

For cable systems with subscriber content, fill in the non-permitted distant call lines in the appropriate subscriber area.
For DSC columns for each subscriber group will automatically calculate with information from the Signals tab.
The "Total DSC" calculation for each subscriber group will automatically be performed based on the information entered into each subscriber area.
The "Cross Receipts" fee for each subscriber group will automatically calculate with information from the Cross Receipts tab.
The "Base Rate Fee" calculation for each subscriber group will be automatically performed.
The Total 3.75 Rate Fee calculation throughout all subscriber groups will be automatically performed and will display on the bottom of the "19-13 - Part 8 (1)" tab. This information will automatically calculate on Space C, Block 3, Line 1. DO NOT DELETE UNLESS PART 8 IS THE TABLE. Deleting unused tabs in any part of Part 8 will cause the form to function improperly. Excess Part 8 tabs may be hidden prior to submission. (Note: the option of hiding unused tabs is not available for operators using the 2007 version of Excel.)

Page 20 - Part 9 (1-4)

Cable systems that have a syndicated exclusivity surcharge calculated on a subscriber group basis can use these tabs to manually perform those calculations.
In the event a syndicated exclusivity surcharge is calculated based on Part 7, that information will NOT automatically calculate in Space C, Block 4, Line 2. The information must be entered manually on that line.
Unused Part 7 syndicated exclusivity surcharge tabs may be hidden prior to submission. (Note: the option of hiding unused tabs is not available for operators using the 2007 version of Excel.)

A Accounting Period	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: 2020/2 (enter four digit year and /1 (for Jan-Jun period) or /2 (for Jul-Dec period) No spaces)
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B Owner	INSTRUCTIONS: Give the full legal name of the owner of the cable system in line 1. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. In line 2, list any other names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.
	<input type="checkbox"/> Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 063187
	1 LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC
2 BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT):	
3 MAILING ADDRESS OF OWNER OF CABLE SYSTEM:	
	2260 E Imperial Hwy Room 839 <small>(Number, street, rural route, apartment, or suite number)</small> El Segundo, CA 90245 <small>(City, town, state, zip)</small>
C System	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
	1 IDENTIFICATION OF CABLE SYSTEM:
	2 MAILING ADDRESS OF CABLE SYSTEM:
	<small>(Number, street, rural route, apartment, or suite number)</small> <small>(City, town, state, zip code)</small>

BARCODE DATA
Filing Period
063

BLOCK 1		
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:		
• Service to first set	18,670	\$19
• Service to additional set(s)		
• FM radio (if separate rate)		
Motel, hotel		
Commercial	108	\$20
Converter		
• Residential		
• Non-residential		

BLOCK 1			
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential	
• Pay cable		• Motel, hotel	
• Pay cable—add'l channel	\$5-\$199	• Commercial	
• Fire protection		• Pay cable	
• Burglar protection		• Pay cable-add'l channel	
Installation: Residential		• Fire protection	
• First set	\$0-\$199	• Burglar protection	
• Additional set(s)		Other services:	
• FM radio (if separate rate)		• Reconnect	\$0-\$35
• Converter		• Disconnect	
		• Outlet relocation	\$0-\$55
		• Move to new address	

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 16
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services 606

N Individual to Be Contacted for Further Information	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
	Name	Myriam Nassif Telephone 310-964-1930
	Address	2260 E Imperial Hwy Room 839 <small>(Number, street, rural route, apartment, or suite number)</small> El Segundo, CA 90245 <small>(City, town, state, zip)</small>
	Email (optional)	mn112s@att.com Fax (optional)

O Certification	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations.) Signature Space O – this form will be submitted with an electronic "s/" signature (e.g., /s/John Smith). Do not forget to enter an electronic signature by typing "s/" followed by your name in the signature box in Space O of tab "page 8, space M-O".
	Typed or printed name: Michael Santogrossi
	Title: Vice President – Finance <small>(Title of official position held in corporation or partnership)</small>
	Date: February 24, 2021

Total Gross Receipts

\$ 8,674,186.98

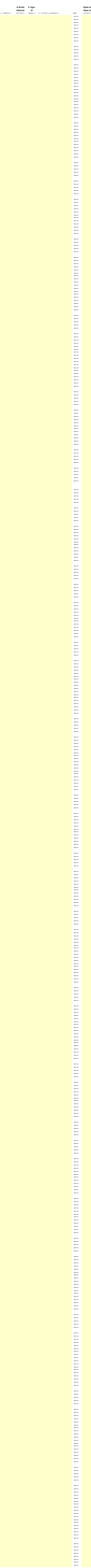
OK

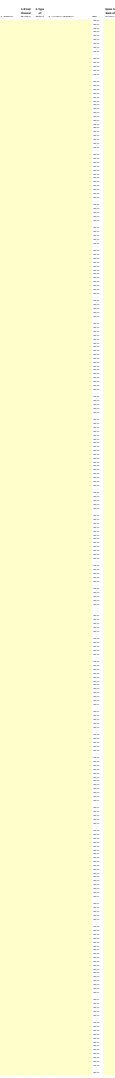
Subgroup Gross Receipts Total

\$ 8,674,186.98

Subgroup	Subgroup/Community Name	Gross Receipts
FIRST	1	\$ 17,339.38
SECOND	2	\$ 8,656,847.60
THIRD	3	
FOURTH	4	
FIFTH	5	
SIXTH	6	
SEVENTH	7	
EIGHTH	8	
NINTH	9	
TENTH	10	
ELEVENTH	11	
TWELVTH	12	
THIRTEENTH	13	
FOURTEENTH	14	
FIFTEENTH	15	
SIXTEENTH	16	
SEVENTEENTH	17	
EIGHTEENTH	18	
NINTEENTH	19	
TWENTIETH	20	
TWENTY-FIRST	21	
TWENTY-SECOND	22	
TWENTY-THIRD	23	
TWENTY-FOURTH	24	
TWENTY-FIFTH	25	
TWENTY-SIXTH	26	
TWENTY-SEVENTH	27	
TWENTY-EIGHTH	28	
TWENTY-NINTH	29	
THIRTIETH	30	
THIRTY-FIRST	31	
THIRTY-SECOND	32	
THIRTY-THIRD	33	
THIRTY-FOURTH	34	
THIRTY-FIFTH	35	
THIRTY-SIXTH	36	
THIRTY-SEVENTH	37	
THIRTY-EIGHTH	38	
THIRTY-NINTH	39	
FORTIETH	40	

Year	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2037	2038	2039	2040	2041	2042	2043	2044	2045	2046	2047	2048	2049	2050						
Population (millions)	7.5	7.6	7.7	7.8	7.9	8.0	8.1	8.2	8.3	8.4	8.5	8.6	8.7	8.8	8.9	9.0	9.1	9.2	9.3	9.4	9.5	9.6	9.7	9.8	9.9	10.0	10.1	10.2	10.3	10.4	10.5	10.6	10.7	10.8	10.9	11.0	11.1	11.2	11.3	11.4	11.5	11.6	11.7	11.8	11.9	12.0
Population (billions)	0.0075	0.0076	0.0077	0.0078	0.0079	0.0080	0.0081	0.0082	0.0083	0.0084	0.0085	0.0086	0.0087	0.0088	0.0089	0.0090	0.0091	0.0092	0.0093	0.0094	0.0095	0.0096	0.0097	0.0098	0.0099	0.0100	0.0101	0.0102	0.0103	0.0104	0.0105	0.0106	0.0107	0.0108	0.0109	0.0110	0.0111	0.0112	0.0113	0.0114	0.0115	0.0116	0.0117	0.0118	0.0119	0.0120
Population (trillions)	0.0000075	0.0000076	0.0000077	0.0000078	0.0000079	0.0000080	0.0000081	0.0000082	0.0000083	0.0000084	0.0000085	0.0000086	0.0000087	0.0000088	0.0000089	0.0000090	0.0000091	0.0000092	0.0000093	0.0000094	0.0000095	0.0000096	0.0000097	0.0000098	0.0000099	0.0000100	0.0000101	0.0000102	0.0000103	0.0000104	0.0000105	0.0000106	0.0000107	0.0000108	0.0000109	0.0000110	0.0000111	0.0000112	0.0000113	0.0000114	0.0000115	0.0000116	0.0000117	0.0000118	0.0000119	0.0000120





LEGAL NAME OF OWNER OF CABLE SYSTEM:

Bellsouth Telecommunications, LLC

SYSTEM ID#

20202

Instructions: Use this sheet to enter any notes or other information that you feel might assist the Copyright Examiner in the examination of your Statement of Account.

Large empty yellow rectangular area for entering notes or other information.

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

**SA3E
 Long Form**

STATEMENT OF ACCOUNT
*for Secondary Transmissions by
 Cable Systems (Long Form)*

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

FOR COPYRIGHT OFFICE USE ONLY	
DATE RECEIVED	AMOUNT
2/24/2021	\$
	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

A Accounting Period	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: 2020/2																						
B Owner	<p>Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. <i>If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.</i></p> <input type="checkbox"/> Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 063187																						
	<p>LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM Bellsouth Telecommunications, LLC</p> <p style="text-align: right;">06318720202 063187 2020/2</p> <p>2260 E Imperial Hwy Room 839 EI Segundo, CA 90245</p>																						
C System	<p>INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.</p>																						
	1	IDENTIFICATION OF CABLE SYSTEM:																					
	2	<p>MAILING ADDRESS OF CABLE SYSTEM: (Number, street, rural route, apartment, or suite number)</p> <p>(City, town, state, zip code)</p>																					
D Area Served First Community Sample	<p>Instructions: For complete space D instructions, see page 1b. Identify only the first community served below and relist on page 1b with all communities.</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">CITY OR TOWN</td> <td style="width: 50%;">STATE</td> </tr> <tr> <td>BATON ROUGE</td> <td>LA</td> </tr> </table> <p>Below is a sample for reporting communities if you report multiple channel line-ups in Space G.</p> <table border="1" style="width: 100%;"> <thead> <tr> <th>CITY OR TOWN (SAMPLE)</th> <th>STATE</th> <th>CH LINE UP</th> <th>SUB GRP#</th> </tr> </thead> <tbody> <tr> <td>Alda</td> <td>MD</td> <td>A</td> <td>1</td> </tr> <tr> <td>Alliance</td> <td>MD</td> <td>B</td> <td>2</td> </tr> <tr> <td>Gering</td> <td>MD</td> <td>B</td> <td>3</td> </tr> </tbody> </table>			CITY OR TOWN	STATE	BATON ROUGE	LA	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#	Alda	MD	A	1	Alliance	MD	B	2	Gering	MD	B	3
CITY OR TOWN	STATE																						
BATON ROUGE	LA																						
CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#																				
Alda	MD	A	1																				
Alliance	MD	B	2																				
Gering	MD	B	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 filing, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#
063187

Bellsouth Telecommunications, LLC

Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.

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

If all communities receive the same complement of television broadcast stations (i.e., 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.

D
Area
Served

CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
BATON ROUGE	LA	AA	2
Addis	LA	AA	2
Albany	LA	AA	2
Ascension Unincorporated County	LA	AA	2
Assumption Unincorporated County	LA	AA	2
Baker	LA	AA	2
Belle Rose	LA	AA	2
Berwick (Outside of all Markets)	LA	AA	2
Brusly	LA	AA	2
Central	LA	AA	2
Clinton	LA	AA	2
Denham Springs	LA	AA	2
Donaldsonville	LA	AA	2
East Baton Rouge Unincorporated County	LA	AA	2
EAST FELICIANA UNINCORPORATED COUNTY	LA	AA	2
Franklin	LA	AA	1
Iberville Unincorporated County	LA	AA	2
Livingston	LA	AA	2
Livingston Unincorporated County	LA	AA	2
Morgan City (Outside of all Markets)	LA	AA	2
New Roads	LA	AA	2
Patterson (Outside of all Markets)	LA	AA	1
Pierre Part	LA	AA	2
Plaquemine	LA	AA	2
Pointe Coupee Unincorporated County	LA	AA	2
Port Allen	LA	AA	2
Saint Francisville	LA	AA	2
Saint Gabriel	LA	AA	2
Saint MARY UNINCORPORATED COUNTY	LA	AA	2
Slaughter	LA	AA	2
Ventress	LA	AA	2
Walker	LA	AA	2
Watson	LA	AA	2
West Baton Rouge Unincorporated County	LA	AA	2
West Feliciana Unincorporated County	LA	AA	2
Zachary	LA	AA	2

First
Community

See instructions for additional information on alphabetization.

Add rows as necessary.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC	SYSTEM ID# 063187
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E

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.

BLOCK 1			BLOCK 2		
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:					
• Service to first set	18,670	\$ 19.00	HD Tech Fee	10,394	\$ 10.00
• Service to additional set(s)			Set-Top Box	18,778	\$0-\$15
• FM radio (if separate rate)			Broadcast TV Surcharge	18,670	\$8.99-\$9.99
Motel, hotel					
Commercial	108	\$ 20.00			
Converter					
• Residential					
• Non-residential					

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES
In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.
Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.
Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

BLOCK 1				BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable		• Motel, hotel		Video on Demand	\$0-\$100
• Pay cable—add'l channel	\$5-\$199	• Commercial		Service Activation Fee	\$0-\$35
• Fire protection		• Pay cable		Credit Management Fee	\$0-\$449
• Burglar protection		• Pay cable-add'l channel		Dispatch on Demand	\$99
Installation: Residential		• Fire protection		Wireless Receiver	\$0 - \$49
• First set	\$0-\$199	• Burglar protection		HD Premium Tier	\$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 OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC	SYSTEM ID# 063187	Name
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PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific 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 multi-cast 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

G

**Primary
Transmitters:
Television**

CHANNEL LINE-UP AA

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
KBTR-CA	41	I	No		Baton Rouge, LA
KPBN-LD	11	I	No		Baton Rouge, LA
WAFB/WAFBHD	9/1009	N	No		Baton Rouge, LA
WBRL-CD/WBRLH	21/1021	I	No		Baton Rouge, LA
WBRZ/WBRZHD	2/1002	N	No		Baton Rouge, LA
WBXH-CA/WBXHR	39/1039	I	No		Baton Rouge, LA
WGMB/WGMBHD	44/1044	I	No		Baton Rouge, LA
WLPB/WLPBHD	27/1027	E	Yes	O	Baton Rouge, LA
WVLA/WVLAHD	33/1033	N	No		Baton Rouge, LA

See instructions for additional information on alphabetization.

LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC	SYSTEM ID# 063187	Name
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PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific 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 multi-cast 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL 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

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC	SYSTEM ID# 063187	Name				
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.		K Gross Receipts				
IMPORTANT: You must complete a statement in space P concerning gross receipts.		<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: right;">\$</td> <td style="text-align: right;">8,674,186.98</td> </tr> <tr> <td colspan="2" style="text-align: center; font-size: small;">(Amount of gross receipts)</td> </tr> </table>	\$	8,674,186.98	(Amount of gross receipts)	
\$	8,674,186.98					
(Amount of gross receipts)						
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: <ul style="list-style-type: none"> • 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. <p>▶ If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below.</p> <p>▶ If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block 3 below.</p> <p>▶ If part 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line 2 in block 4 below.</p>		L Copyright Royalty Fee				
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K \$ 8,674,186.98 Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here. This is your minimum fee. \$ 92,293.35					
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information you gave in space G. If, in space G, you identified any stations as "distant" by stating "Yes" in column 4, you must check "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? <input checked="" type="checkbox"/> Yes—Complete the DSE schedule. <input type="checkbox"/> No—Leave block 3 below blank and complete line 1, block 4.					
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero \$ 46.12 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 \$ 46.12					
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 \$ 92,293.35 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 Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet) \$ 0.00 Line 4. FILING FEE. \$ 725.00 TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. \$ 93,018.35 Add Lines 1, 2 and 3 of block 4 and enter total here					
Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) of the general instructions located in the paper SA3 form for more information.)		Cable systems submitting additional deposits under Section 111(d)(7) should contact the Licensing Division for the appropriate form for submitting the additional fees.				

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:
Bellsouth Telecommunications, LLC **SYSTEM ID#**
063187

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 **16**

2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services **606**

N
Individual to Be Contacted for Further Information

INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)

Name **Myriam Nassif** Telephone **310-964-1930**

Address **2260 E Imperial Hwy Room 839**
(Number, street, rural route, apartment, or suite number)

El Segundo, CA 90245
(City, town, state, zip)

Email **mn112s@att.com** Fax (optional) _____

O
Certification

CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations.)


- 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 identified in line 1 of space B and that the owner is not a corporation or partnership; or

(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.

- I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]

 **X** **/s/ Michael Santogrossi**

Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.

Typed or printed name: **Michael Santogrossi**

Title: **Vice President – Finance**
(Title of official position held in corporation or partnership)

Date: **February 24, 2021**

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC	SYSTEM ID# 063187	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES. Enter the total here and list the satellite carrier(s) below. \$ _____		P Special Statement Concerning Gross Receipts Exclusion
Name _____ Mailing Address _____ _____ _____	Name _____ Mailing Address _____ _____ _____	
INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment _____ <div style="text-align: right; margin-left: 400px;">x _____</div> Line 2 Multiply line 1 by the interest rate* and enter the sum here _____ - <div style="text-align: right; margin-left: 400px;">x _____ days</div> Line 3 Multiply line 2 by the number of days late and enter the sum here _____ - <div style="text-align: right; margin-left: 400px;">x 0.00274</div> Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7) \$ _____ - <div style="text-align: right; margin-left: 400px;">(interest charge)</div> <p>* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.</p> <p>** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.</p> <p>NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.</p> Owner _____ Address _____ _____ _____ First community served _____ Accounting period _____ ID number _____		Q Interest Assessment

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

SCHEDULE

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

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

First DSE	1.064% of gross receipts
Each of the second, third, and fourth DSEs	0.701% of gross receipts
The fifth and each additional DSE	0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

- If any of the stations were partially distant:
 1. Divide all of your 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:

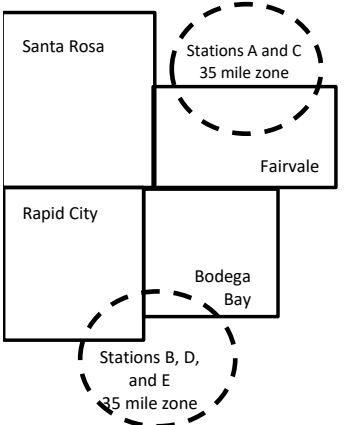
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 Carried		Identification of Subscriber Groups		GROSS RECEIPTS FROM SUBSCRIBERS	
	STATION	DSE	CITY	SERVICE AREA OF		
	A (independent)	1.0		OUTSIDE LOCAL		
	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 (Santa Rosa)		Second Subscriber Group (Rapid City and Bodega Bay)		Third Subscriber Group (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)					



Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC	SYSTEM ID# 063187
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3

Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity

Instructions: CAPACITY
Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3).
Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station.
Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period.
Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.
Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25."
Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.)

CATEGORY LAC STATIONS: COMPUTATION OF DSEs					
1. CALL SIGN	2. NUMBER OF HOURS CARRIED BY SYSTEM	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAGE VALUE	5. TYPE VALUE	6. DSE
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=

SUM OF DSEs OF CATEGORY LAC STATIONS:
 Add the DSEs of each station.
 Enter the sum here and in line 2 of part 5 of this schedule,▶ 0.00

4

Computation of DSEs for Substitute-Basis Stations

Instructions:
Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station:
 • Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and
 • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I).
Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I.
Column 3: Enter the number of days in the calendar year: 365, except in a leap year.
Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.)

SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs							
1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	

SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS:
 Add the DSEs of each station.
 Enter the sum here and in line 3 of part 5 of this schedule,▶ 0.00

5

Total Number of DSEs

TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total number of DSEs applicable to your system.

1. Number of DSEs from part 2 ●	_____	▶	_____	0.25
2. Number of DSEs from part 3 ●	_____	▶	_____	0.00
3. Number of DSEs from part 4 ●	_____	▶	_____	0.00
TOTAL NUMBER OF DSEs _____▶				0.25

LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC	SYSTEM ID# 063187	Name
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Instructions: Block A must be completed.
 In block A:
 • If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule.
 • If your answer if "No," complete blocks B and C below.

6

**Computation of
3.75 Fee**

BLOCK A: TELEVISION MARKETS

Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in effect on June 24, 1981?

Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7.

No—Complete blocks B and C below.

BLOCK B: CARRIAGE OF PERMITTED DSEs

Column 1: CALL SIGN List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)

Column 2: BASIS OF PERMITTED CARRIAGE Enter the appropriate letter indicating the basis on which you carried a permitted station. (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)

A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)]

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 Noncommercial 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 previously carried on a part-time or substitute basis prior to June 25, 1981

G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)]

M Retransmission of a distant multicast stream.

Column 3: List the DSE for each distant station listed in parts 2, 3, and 4 of the schedule.
 *(Note: For those stations identified by the letter "F" in column 2, you must complete the worksheet on page 14 of this schedule to determine the DSE.)

1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE
WLPB/WLP	C	0.25						

0.25

BLOCK C: COMPUTATION OF 3.75 FEE

Line 1: Enter the total number of DSEs from part 5 of this schedule _____

Line 2: Enter the sum of permitted DSEs from block B above _____

Line 3: Subtract line 2 from line 1. This is the total number of DSEs subject to the 3.75 rate.
 (If zero, leave lines 4–7 blank and proceed to part 7 of this schedule) _____

Line 4: Enter gross receipts from space K (page 7) _____ x 0.0375 _____

Line 5: Multiply line 4 by 0.0375 and enter sum here _____ x _____

Line 6: Enter total number of DSEs from line 3 _____

Line 7: Multiply line 6 by line 5 and enter here and on line 2, block 3, space L (page 7) _____

0.00

**Do any of the
DSEs represent
partially
permitted/
partially
nonpermitted
carriage?
If yes, see part
9 instructions.**

Name: **Bellsouth Telecommunications, LLC** **SYSTEM ID# 063187**

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Worksheet for Computing the DSE Schedule for Permitted Part-Time and Substitute Carriage

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 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 identified by the letter "F" in column 2 of part 6 of the DSE schedule.

Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981.

Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1).

Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters:
 (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)

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)).

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 file in the Licensing Division.

PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS					
1. CALL SIGN	2. PRIOR DSE	3. ACCOUNTING PERIOD	4. BASIS OF CARRIAGE	5. PRESENT DSE	6. PERMITTED DSE

7

Computation of the Syndicated Exclusivity Surcharge

Instructions: Block A must be completed.
 In block A:
 If your answer is "Yes," complete blocks B and C, below.
 If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule.

BLOCK A: MAJOR TELEVISION MARKET

• 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?

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 commercial VHF station that places a grade B contour, in whole or in part, over the cable system? <input type="checkbox"/> Yes—List each station below with its appropriate permitted DSE <input checked="" type="checkbox"/> No—Enter zero and proceed to part 8.	Was any station listed in block B of part 7 carried in any community served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) <input type="checkbox"/> Yes—List each station below with its appropriate permitted DSE <input checked="" type="checkbox"/> No—Enter zero and proceed to part 8.																																																																
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>CALL SIGN</th> <th>DSE</th> <th>CALL SIGN</th> <th>DSE</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr> <td colspan="2" style="text-align: center;">TOTAL DSEs</td> <td colspan="2" style="text-align: center;">0.00</td> </tr> </tbody> </table>	CALL SIGN	DSE	CALL SIGN	DSE																									TOTAL DSEs		0.00		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>CALL SIGN</th> <th>DSE</th> <th>CALL SIGN</th> <th>DSE</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr> <td colspan="2" style="text-align: center;">TOTAL DSEs</td> <td colspan="2" style="text-align: center;">0.00</td> </tr> </tbody> </table>	CALL SIGN	DSE	CALL SIGN	DSE																									TOTAL DSEs		0.00	
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LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC		SYSTEM ID# 063187	Name
BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE			
Section 1	Enter the amount of gross receipts from space K (page 7)	▶ \$ 8,674,186.98	7 Computation of the Syndicated Exclusivity Surcharge
Section 2	A. Enter the total DSEs from block B of part 7	▶ 0.00	
	B. Enter the total number of exempt DSEs from block C of part 7	▶ 0.00	
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	▶ \$ 0.00	
• Is any portion of the cable system within a top 50 television market as defined by the FCC? <input type="checkbox"/> Yes—Complete section 3 below. <input checked="" type="checkbox"/> 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? <input checked="" type="checkbox"/> Yes—Complete part 9 of this schedule. <input type="checkbox"/> 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 section 1)	▶ \$ 	
	B. Enter 0.00377 of gross receipts (the amount in section 1)	▶ \$ 	
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here	▶ 	
	D. Multiply line B by line C and enter here	▶ 	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)	▶ \$ 	
Syndicated Exclusivity Surcharge			
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)	▶ \$ 	
	B. Enter 0.00377 of gross receipts (the amount in section 1)	▶ \$ 	
	C. Multiply line B by 3.000 and enter here	▶ \$ 	
	D. Enter 0.00178 of gross receipts (the amount in section 1)	▶ \$ 	
	E. Subtract 4.000 from total DSEs (the figure on line C in section 2) and enter here	▶ 	
	F. Multiply line D by line E and enter here	▶ \$ 	
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 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? <input checked="" type="checkbox"/> Yes—Complete part 9 of this schedule. <input type="checkbox"/> No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.		
	A. Enter 0.00300 of gross receipts (the amount in section 1)	▶ \$ 	
	B. Enter 0.00189 of gross receipts (the amount in section 1)	▶ \$ 	
	C. Subtract 1.000 from total permitted DSEs (the 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			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC	SYSTEM ID# 063187
7 Computation of the Syndicated Exclusivity Surcharge	Section 4b If the figure in section 2, line C is more than 4,000, compute your surcharge here and leave section 4a blank. 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. Multiply line B by 3.000 and enter here. ▶ \$ _____ D. Enter 0.00089 of gross receipts (the amount in section 1). ▶ \$ _____ E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. ▶ _____ F. Multiply line D by line E and enter here ▶ \$ _____ G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) _____ Syndicated Exclusivity Surcharge. ▶ \$ _____	

8 Computation of Base Rate Fee	Instructions: You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5. <ul style="list-style-type: none"> • In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. • If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. • If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank. What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.	
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BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS

• 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 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 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) ▶ _____
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. ▶ \$ _____ 0.00

LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC	SYSTEM ID# 063187	Name
Section 4 If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.	8	
A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ \$ _____ B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$ _____ C. Multiply line B by 3.000 and enter here ▶ \$ _____ D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$ _____ E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here ▶ _____ F. Multiply line D by line E and enter here ▶ \$ _____ G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee ▶ \$ 0.00	Computation of Base Rate Fee	

IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in Space G.

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 this exclusion, you must:

First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.

Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.

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 must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only.

How to Identify a Subscriber Group for Partially Distant Stations

Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.

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, by the same token, the station is distant to the subscriber.)

Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide.

Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber groups.

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 system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,
 - 2) 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.
- 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 total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.

9

Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations, and for Partially Permitted Stations

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	<p>Bellsouth Telecommunications, LLC</p> <p>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.</p> <p>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.</p>	<p>063187</p>

LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC						SYSTEM ID# 063187		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIRST SUBSCRIBER GROUP					SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ 0					COMMUNITY/ AREA _____ 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	9 Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
WLPB/WLPBHD	0.25								
Total DSEs			0.25	Total DSEs			0.00		
Gross Receipts First Group			\$ 17,339.38	Gross Receipts Second Group			\$ 8,656,847.60		
Base Rate Fee First Group			\$ 46.12	Base Rate Fee Second Group			\$ 0.00		
THIRD SUBSCRIBER GROUP					FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ 0					COMMUNITY/ AREA _____ 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third Group			\$ 0.00	Gross Receipts Fourth Group			\$ 0.00		
Base Rate Fee Third Group			\$ 0.00	Base Rate Fee Fourth Group			\$ 0.00		
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ 46.12			

LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC						SYSTEM ID# 063187		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIFTH SUBSCRIBER GROUP					SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ 0					COMMUNITY/ AREA _____ 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ 0.00				Total DSEs _____ 0.00					
Gross Receipts First Group \$ _____ 0.00				Gross Receipts Second Group \$ _____ 0.00					
Base Rate Fee First Group \$ <input type="text" value="0.00"/>				Base Rate Fee Second Group \$ <input type="text" value="0.00"/>					
SEVENTH SUBSCRIBER GROUP					EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ 0					COMMUNITY/ AREA _____ 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ 0.00				Total DSEs _____ 0.00					
Gross Receipts Third Group \$ _____ 0.00				Gross Receipts Fourth Group \$ _____ 0.00					
Base Rate Fee Third Group \$ <input type="text" value="0.00"/>				Base Rate Fee Fourth Group \$ <input type="text" value="0.00"/>					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<input style="width: 100%; height: 20px;" type="text"/>			

9
 Computation
 of
 Base Rate Fee
 and
 Syndicated
 Exclusivity
 Surcharge
 for
 Partially
 Distant
 Stations

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC						SYSTEM ID# 063187		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIRST SUBSCRIBER GROUP					SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ 0					COMMUNITY/ AREA _____ 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ 0.00					Total DSEs _____ 0.00				
Gross Receipts First Group \$ _____ 17,339.38					Gross Receipts Second Group \$ _____ 8,656,847.60				
Base Rate Fee First Group \$ _____ 0.00					Base Rate Fee Second Group \$ _____ 0.00				
THIRD SUBSCRIBER GROUP					FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ 0					COMMUNITY/ AREA _____ 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ 0.00					Total DSEs _____ 0.00				
Gross Receipts Third Group \$ _____ 0.00					Gross Receipts Fourth Group \$ _____ 0.00				
Base Rate Fee Third Group \$ _____ 0.00					Base Rate Fee Fourth Group \$ _____ 0.00				
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____ 0.00			

9
Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC						SYSTEM ID# 063187		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIFTH SUBSCRIBER GROUP					SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ 0					COMMUNITY/ AREA _____ 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs		<u>0.00</u>			Total DSEs		<u>0.00</u>		
Gross Receipts First Group		\$ <u>0.00</u>			Gross Receipts Second Group		\$ <u>0.00</u>		
Base Rate Fee First Group		\$ 0.00			Base Rate Fee Second Group		\$ 0.00		
SEVENTH SUBSCRIBER GROUP					EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ 0					COMMUNITY/ AREA _____ 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs		<u>0.00</u>			Total DSEs		<u>0.00</u>		
Gross Receipts Third Group		\$ <u>0.00</u>			Gross Receipts Fourth Group		\$ <u>0.00</u>		
Base Rate Fee Third Group		\$ 0.00			Base Rate Fee Fourth Group		\$ 0.00		
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ 			

9
Computation
of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC	SYSTEM ID# 063187
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BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you 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:

First 50 major television market
 Second 50 major television market

INSTRUCTIONS:

- Step 1:** In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2:** In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3:** In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4:** Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs <input style="width: 100px;" type="text"/>	Line 1: Enter the VHF DSEs <input style="width: 100px;" type="text"/>
Line 2: Enter the Exempt DSEs <input style="width: 100px;" type="text"/>	Line 2: Enter the Exempt DSEs <input style="width: 100px;" type="text"/>
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation <input style="width: 100px;" type="text" value="-"/>	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation <input style="width: 100px;" type="text" value="-"/>
SYNDICATED EXCLUSIVITY SURCHARGE First Group <input style="width: 100px;" type="text" value="\$"/>	SYNDICATED EXCLUSIVITY SURCHARGE Second Group <input style="width: 100px;" type="text" value="\$"/>

THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs <input style="width: 100px;" type="text"/>	Line 1: Enter the VHF DSEs <input style="width: 100px;" type="text"/>
Line 2: Enter the Exempt DSEs <input style="width: 100px;" type="text"/>	Line 2: Enter the Exempt DSEs <input style="width: 100px;" type="text"/>
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation <input style="width: 100px;" type="text" value="-"/>	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation <input style="width: 100px;" type="text" value="-"/>
SYNDICATED EXCLUSIVITY SURCHARGE Third Group <input style="width: 100px;" type="text" value="\$"/>	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group <input style="width: 100px;" type="text" value="\$"/>

SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Bellsouth Telecommunications, LLC	SYSTEM ID# 063187
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BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you 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:

First 50 major television market
 Second 50 major television market

INSTRUCTIONS:

- Step 1:** In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2:** In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3:** In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4:** Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation -	Line 1: Enter the VHF DSEs <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation -
SYNDICATED EXCLUSIVITY SURCHARGE First Group \$ <input style="width: 100px;" type="text"/>	SYNDICATED EXCLUSIVITY SURCHARGE Second Group \$ <input style="width: 100px;" type="text"/>

SEVENTH SUBSCRIBER GROUP	EIGHTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation -	Line 1: Enter the VHF DSEs <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation -
SYNDICATED EXCLUSIVITY SURCHARGE Third Group \$ <input style="width: 100px;" type="text"/>	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group \$ <input style="width: 100px;" type="text"/>

SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) \$



Cable Worksheet

\$11,229,033.60

69

Total amount of remittance

Number of SAs rec'd

Initials

02/26/21

Date of remittance

 Check FT FILING FEES

Cable ID #	63187		Amount	Initials
Examined by	Reviewed by	Date examination completed	Allocation number	RIC
EH		06/08/21	1034421	\$93,018.35
Space A Accounting Period	2020/2 (enter four digit year and /1 (for Jan-Jun period) or /2 (for Jul-Dec period) No spaces)			
	<input type="checkbox"/> Letter sent	<input type="checkbox"/> Information received		
	<input checked="" type="checkbox"/> Accepted	<input type="checkbox"/> Phone call/Date/Contact		
Space B Owner				
	<input type="checkbox"/> Letter sent	<input type="checkbox"/> Information received		
	<input checked="" type="checkbox"/> Accepted	<input type="checkbox"/> Phone call/Date/Contact		
Space D Area Served				
	<input type="checkbox"/> Letter sent	<input type="checkbox"/> Information received		
	<input checked="" type="checkbox"/> Accepted	<input type="checkbox"/> Phone call/Date/Contact		
Space E Secondary Transission Service Subscribers: and Rates				
	<input type="checkbox"/> Letter sent	<input type="checkbox"/> Information received		
	<input checked="" type="checkbox"/> Accepted	<input type="checkbox"/> Phone call/Date/Contact		
Space G Primary Transmitters: Television				
	<input type="checkbox"/> Letter sent	<input type="checkbox"/> Information received		
	<input checked="" type="checkbox"/> Accepted	<input type="checkbox"/> Phone call/Date/Contact		
Space H Primary Transmitters: Radio				
	<input checked="" type="checkbox"/> Accepted	<input type="checkbox"/> Phone call/Date/Contact		
				Space I Substitute Carriage
<input type="checkbox"/> Letter sent				
<input checked="" type="checkbox"/> Accepted				
				Space J Part-time Carriage Log (SA3 only)
<input type="checkbox"/> Letter sent				
<input checked="" type="checkbox"/> Accepted				
				Space K Gross Receipts
<input type="checkbox"/> Letter sent				
<input checked="" type="checkbox"/> Accepted				
				Space L Copyright Filing and Royalty Fees
<input type="checkbox"/> Royalty Fee should be				
<input type="checkbox"/> Refund request to fiscal				
<input checked="" type="checkbox"/> Accepted				
				Space M Channels
<input type="checkbox"/> Letter sent				
<input checked="" type="checkbox"/> Accepted				
				Space O Certification
<input type="checkbox"/> Letter sent				
<input checked="" type="checkbox"/> Accepted				
				Space P Statement of Gross Receipts
<input type="checkbox"/> Letter sent				
<input checked="" type="checkbox"/> Accepted				
				Space Q Interest Assessment
<input type="checkbox"/> Letter sent				
<input checked="" type="checkbox"/> Accepted				