



Public Utility Commission of Texas

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SCHEDULE B

FORM FOR CALCULATING THE VALUE OF IN-KIND COMPENSATION

Pursuant to Chapter 283 Local Government Code (HB 1777) and PUC Subst. R. 26.463

PUC Support for Completing this Form: `1-512-936-7322

PURPOSE OF THIS FORM:

The purpose of this form is to calculate the "Value of In-Kind Compensation" received in 1998. In this form you will determine your eligibility to receive in-kind compensation and the value of the compensation. Tear off and return page 3 along with other required materials back to the commission. Do not send back the instructions.

Important Notice:

Failure to accurately and timely report this information may result in a delay in implementing your municipality's new franchise compensation rate. Further, for the duration of any delay, a municipality's base amount shall be assumed to be zero. A municipality shall not be eligible to recover past compensation it would have received under the new rates.

DEFINITIONS:

In-Kind Services. Services received by a municipality from a CTP during calendar year 1998 at either no cost or below cost as part of an effective franchise agreement or ordinance.

In-Kind Facilities. Facilities received by a municipality from a CTP before or during calendar year 1998 at either no cost or below cost as part of an effective franchise agreement or ordinance.

In-Kind Compensation. The sum of the value of In-Kind services and In-Kind facilities as defined above.

INSTRUCTIONS:

1. These instructions pertain to page 3 of this Schedule.
2. Round up all figures to the nearest dollar value.
3. Attach documentation relevant to this Schedule on the last page.
4. Part (a) - You can answer “yes” only if the response to either of the statements is “true.” You must have actually received some amount of in-kind compensation specified in your effective franchise agreement. Merely being provided the opportunity for in-kind compensation is insufficient for a “Yes” response.
5. Part (b) -Documentation of in-kind compensation. Identify the effective ordinance or agreement by which you received in-kind compensation. Write the ordinance number and the name of the CTP with whom the agreement exists. Also, attach the relevant portion(s) of the franchise agreement or ordinance to the hard copy of your form submitted to the PUC.
6. Part (c) -Determining the value of in-kind compensation. Municipalities have two options for valuing in-kind compensation.
 - (i) All municipalities who received in-kind compensation in 1998 of any amount may claim the value of that compensation to be 1% of the “Base amount without in-kind compensation” calculated in Schedule A (line 18), and do not have to provide any calculation of the actual value received. For example, if the “Base amount without in-kind compensation” you calculated in Schedule A is \$9456.00, enter \$95.
 - (ii) A municipality that wants to claim a higher value of in-kind compensation than 1% of the “Base amount without in-kind compensation” must complete Schedule C and calculate the value pursuant to Schedule C instructions.
7. Part (d) - Value of In-Kind Compensation. Enter the value of in-kind compensation as follows: If you answered “Yes” to (a), re-enter (c)(i) or (c)(ii). If you answered “No” to (a), enter \$0.

Schedule B

Name of your Municipality: _____

- (a) Answer "Yes" if one of the following is true; Otherwise answer "No":
 - (i) You received in-kind services in 1998 as part of your effective franchise agreement with CTPs.
 - (ii) You received in-kind facilities before or during 1998 as part of your effective franchise agreement with CTPs.

Yes No

If you answered "No," proceed to (d), enter \$0 in the box. You do not have to complete (b) and (c).

- (b) If you answered "Yes" to (a), enter the City Ordinance number(s) and/or the name of the CTP(s) with whom you have a franchise agreement that authorizes in-kind compensation. Attach the relevant portion of the 1998 franchise agreement or ordinance. If this space is insufficient attach a separate sheet.

- (c) (i) If you answered "Yes" to (a), AND you want to claim that the value of the in-kind compensation is equal to 1% of the "Base amount without In-Kind Compensation" you calculated in Schedule A, (line 18) enter 1% of the value of "Base amount without In-Kind Compensation."

\$ _____

OR

- (ii) If you answered "Yes" to (a), AND you want to claim that the combined value of all in-kind compensation provided by all CTPs in your municipality in 1998 is more than 1% of the "Base amount without In-Kind Compensation" you calculated in Schedule A, line 18, use Schedule C and enter the amount you calculate in Schedule C.

[Amount from Schedule C] \$ _____

(d) "Value of In-kind Compensation": If you answered "Yes" to (a), reenter (c) <input style="width: 150px; height: 25px;" type="text"/> If you answered "No" to (a) enter \$0

[STOP. You have calculated the value of In-kind services. Transfer this value to the Base Amount Form, Section III, page 4.]