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				
09/06/2017	\$ ALLOCATION NUMBER			

Return completed workbook by email to:

### coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting Period	2017/1								
B Owner	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 corpo rate 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 If there were different owners during the accounting period, only the owner on the last day of the accounting period should submi a single statement of account and royalty fee payment covering the entire accounting perioa  Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.  1029525  LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM City of Bardstown DBA Bardstown Cable								
				02952520171 029525 2017/1					
	220 N 5th Street Bardstown, KY 40004-1404								
С	<b>INSTRUCTIONS:</b> In line 1, give any business or trade names used to ic names already appear in space B. In line 2, give the mailing address of								
System	1 IDENTIFICATION OF CABLE SYSTEM:								
	MAILING ADDRESS OF CABLE SYSTEM:								
	2 (Number, street, rural route, apartment, or suite number)								
	(City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b					
Area Served	with all communities.  CITY OR TOWN	STATE							
First	Nelson County	KY							
Community	Below is a sample for reporting communities if you report multiple cha	Innel line-ups in S	pace G.						
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#					
Sample	Alda	MD	Α	1					
Julipie	Alliance	MD	В	2					
	Gering	MD	В	3					

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

FORM SA3E. PAGE 1b.				Γ				
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#					
City of Bardstown DBA Bardstown Cable			029525					
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.								
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile hor below the identified city or town.	ne parks should be	e reported in pare	ntheses					
If all communities receive the same complement of television broadcast stations (i.e., or all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each redesignated by a number (based on your reporting from Part 9).	ie column blank. If	f you report any st	ations					
When reporting the carriage of television broadcast stations on a community-by-commuchannel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns in	l a subscriber grou							
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#					
Nelson County	KY		1	First				
Washington County	KY		2	Community				
				See instructions for				
				additional information				
				on alphabetization.				
				Add rows as necessary				
				i				


Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

City of Bardstown DBA Bardstown Cable

029525

### 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.

BLO	OCK 1		BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE		
Residential:							
<ul> <li>Service to first set</li> </ul>	3,481	\$ 18.24	County Service	4,429	\$ 22.99		
<ul> <li>Service to additional set(s)</li> </ul>							
<ul> <li>FM radio (if separate rate)</li> </ul>							
Motel, hotel	22	8.24+\$1 A/O	County Motels	6	2.99+\$1 A/O		
Commercial							
Converter							
<ul> <li>Residential</li> </ul>							
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 2					
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RA	TE
Continuing Services:		Installation: Non-residential				
Pay cable	See Block 2	Motel, hotel	\$10 -\$135	нво	\$	15.00
<ul> <li>Pay cable—add'l channel</li> </ul>	See Block 2	Commercial		HBO A/O Motel		\$3.50
Fire protection	NA	Pay cable	\$10 - \$18			
Burglar protection	NA	Pay cable-add'l channel	\$10 - \$18	Showtime Combo	\$	12.00
Installation: Residential		Fire protection	NA		•••••	
First set	\$10 - \$135	Burglar protection		Cinemax	\$	7.14
Additional set(s)	\$10 - \$32	Other services:			•••••	
• FM radio (if separate rate)	NA	Reconnect	\$10 -\$40	Expanded Basic	\$	44.63
Converter	NA	Disconnect				
		Outlet relocation	\$10 - \$32	Discounts may vary for		
		Move to new address	\$10 - \$135	other combos		

FORM SA3E. PAGE 3.						T	
LEGAL NAME OF OWN					SYSTEM ID#	Namo	
City of Bardsto			able		029525		
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 multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel							
on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is identified.							
Note: If you are utilizing	.3	• •	EL LINE-UP	•			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
WKMJ-1	68-1	E	NO		Louisville, KY		
WKMJ-2	68-2	E-M	NO		Louisville, KY	See instructions for	
WKMJ-3	68-3	E-M	NO		Louisville, KY	additional information	
WAVE-1	3-1	N	NO		Louisville, KY	on alphabetization.	
WAVE-2	3-2	I-M	NO		Louisville, KY	1	
WAVE-3	3-3	I-M	NO		Louisville, KY	1	
WBKI-1	34-1	ı	NO	<b></b>	Louisville, KY	1	
WDRB-1	41-1	I	NO	<del> </del>	Louisville, KY	1	
WDRB-2	41-2	I-M	NO		Louisville, KY	1	
WKZT-1	23-1	E	NO		Louisville, KY	1	
WHAS-1	11-1	N N	NO		Louisville, KY	1	
WHAS-2	11-2	I-M	NO		Louisville, KY	1	
WLKY-1							
	32-1 32-2	N I M	NO		Louisville, KY	1	
WLKY-2	32-2	I-M	NO		Louisville, KY		
WBNA-1	21-1		NO		Louisville, KY	1	
WBNA-2	21-2	I-M	NO		Louisville, KY	·	
WBNA-3	21-3	I-M	NO		Louisville, KY	·	
WBNA-4	21-4	I-M	NO		Louisville, KY		

FORM SA3E. PAGE 3.						VG 1 ENIOD. 2017/1	
LEGAL NAME OF OWN			abla		SYSTEM ID# 029525	Name	
			able		029525		
City of Bardstown DBA Bardstown Cable  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 multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for networ							
-		CHANN	EL LINE-UP	AB			
1. CALL SIGN							
WKYT-1	27-1	N	YES	O	Lexington, KY		
WKYT-2	27-2	I-M	YES	0	Lexington, KY		
WFTE-1	58-1	I	NO		Salem, IN		
WO6AY	6-1	I	NO		Lebanon, KY		
					ļ		
	<u> </u>	<u> </u>			ļ		
	<u> </u>						
	<u> </u>	L		<u> </u>	<u> </u>		

ACCOUNTING PERIOD: 2017/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 029525 City of Bardstown DBA Bardstown Cable PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM S/D

FORM SA3E. PAGE 5.								ACCOUNTING	PERIOD: 2017/1
LEGAL NAME OF OWNER OF City of Bardstown DBA							S	YSTEM ID# 029525	Name
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG  In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a									ı
substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE									
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?									
<b>Note:</b> If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.									
2. LOG OF SUBSTITUTE PROGRAMS  In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the call sign of the station broadcasting the substitute program.  Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).  Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m."  Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.									
S	SUBSTITUT	E PROGRAM	1		EN SUBS			7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES	S TO	DELETION	
						_			
						_			
	<del> </del>								
						_			
						_			
	<del> </del>		1		<del> </del>				

ACCOUNTING PERIOD: 2017/1 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 029525 City of Bardstown DBA Bardstown Cable PART-TIME CARRIAGE LOG J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

LE	GAL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name					
Ci	ty of Bardstown DBA Bardstown Cable		029525	Name					
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  \$ 1,001,918.38									
IIVI	PORTANT: You must complete a statement in space P concerning gross receipts.	(Amount	of gross receipts)						
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:  Complete block 1, showing your minimum fee.  Complete block 2, showing whether your system carried any distant television stations.  If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.  If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.									
	part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should back 3 below.	oe entered on li	ine 1 of						
▶ If	part 6 of the DSE schedule was completed, the amount from line 7 of block C should be below.	entered on line	e 2 in block						
	part 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be entered	d on line						
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.  Line 1. Enter the amount of gross receipts from space K  Line 2. Multiply the amount in line 1 by 0.01064								
	Enter the result here.								
	This is your minimum fee.	\$	10,660.41						
Block 2	space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colu "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting per   X Yes—Complete the DSE schedule.  No—Leave block 3 below blank and complete the DSE schedule.	mn 4, you mus	st check						
Block	Line 1. <b>BASE RATE FEE:</b> 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	\$	12,356.63						
	Line 2. <b>3.75 Fee:</b> 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	\$	12,356.63						
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	\$	12,356.63	Cable systems					
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE</b> : Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.		0.00	submitting additional deposits under					
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9  (Interest Worksheet)	\$	1.79	Section 111(d)(7) should contact the Licensing					
	Line 4. FILING FEE	<u>   \$                                 </u>	725.00	additional fees.  Division for the appropriate					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$	13,083.42	form for submitting the additional fees.					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. general instructions located in the paper SA3 form for more information.)	(See page (i) o	f the						

Name	LEGAL NAME OF OWNER OF CABL  City of Bardstown DBA		SYSTEM ID# 029525						
	CHANNELS								
M		re (1) the number of channels on which the cable system carried television broadcast stations							
Channala	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.								
Channels	Enter the total number o	f channels on which the cable							
	system carried television	broadcast stations							
	2. Enter the total number o	f activated channels							
	=	n carried television broadcast stations 116							
	and nonbroadcast service	S							
N	INDIVIDUAL TO BE CONT	ACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual							
Individual to	we can contact about this s	statement of account.)							
Be Contacted									
for Further Information	Name <b>Jeffrey C. M</b>	ills Telephone <b>502-348-5947</b>							
illioillation	Add 220 N 5th Ct	work							
	Address 220 N 5th St (Number, street, rura	reet al route, apartment, or suite number)							
	Bardstown,	KY 40004-1404							
	(City, town, state, 2ij	.)							
	Email	Fax (optional)							
	CERTIFICATION /This state	most of account must be cartifed and signed in accordance with Converget Office regulations							
0	CERTIFICATION (This state	ment of account must be certifed and signed in accordance with Copyright Office regulations.							
Certifcation	• I, the undersigned, hereby	certify that (Check one, but only one, of the boxes.)							
	(Owner other than corpo	oration or partnership) I am the owner of the cable system as identifed in line 1 of space B; or							
	(Cimor Cimor andir Corp.)								
		nan corporation or partnership) I am the duly authorized agent of the owner of the cable system as identifulated that the owner is not a corporation or partnership; or	ied						
	_	an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the cable s							
	(Officer or partner) I am in line 1 of space B.	ran onicer (if a corporation) of a partner (if a partnership) of the legal entity identified as owner of the cable's	ystem						
	I have examined the statem	nent of account and hereby declare under penalty of law that all statements of fact contained herein							
	are true, complete, and corre [18 U.S.C., Section 1001(19)	ect to the best of my knowledge, information, and belief, and are made in good faith. 86)]							
	X	/s/ Jeffrey C. Mills							
	Entor	on electronic signature on the line above using an "/a/" signature to cotify this statement							
	(e.g.,	an electronic signature on the line above using an "/s/" signature to certify this statement.  /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and pre- utton, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settii							
	Typed or printed name: <b>Jeffrey C. Mills</b>								
	Title:	City Electrical Engineer							
	Title.	(Title of official position held in corporation or partnership)							
	<b>D</b> . ( )	August 21, 2017							
	Date:	August 31, 2017							

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th 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 telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and 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: City of Bardstown DBA Bardstown Cable	SYSTEM ID# 029525	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyr lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cal service of providing secondary transmissions of primary broadcast transmitters, the secribers and amounts collected from subscribers receiving secondary transmissions providing secondary transmissions providing secondary transmissions provided in the secondary transmissions	ble system for the basic system shall not include sub- pursuant to section 119."	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below.  Name Mailing Address  Name Mailing Address		
INTEREST ASSESSMENTS  You must complete this worksheet for those royalty payments submitted as a result of a late	nayment or undergayment	_
For an explanation of interest assessment, see page (viii) of the general instructions in the p		Q
Line 1 Enter the amount of late payment or underpayment	\$ 13,081.63	Interest Assessment
	x 1%	
Line 2 Multiply line 1 by the interest rate* and enter the sum here		
Line 3 Multiply line 2 by the number of days late and enter the sum here	x 5 days 654.08 x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,		
space L, (page 7)	\$ 1.79 (interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	, , , , , , , , , , , , , , , , , , , ,	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day la	ate.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to to please list below the owner, address, first community served, accounting period, and ID numfilling.		
Owner Address		
First community served		
Accounting period		
ID number		

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

ACCOUNTING PERIOD: 2017/1

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

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

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

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

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

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing DCEs	

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

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

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

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

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

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

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

### TOTAL OF DSEs

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

### THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

 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.

- Calculate a separate base rate fee for each subscriber group, using
   the rates given above;
   the total number of DSEs for that group's complement of stations;
   and
   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:

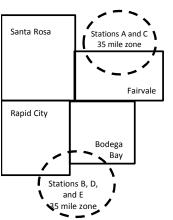
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 o	of Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
in	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
6	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 DSFs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

		<b>40,0000</b>			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

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

**ACCOUNTING PERIOD: 2017/1** 

DSE SCHEDULE. PAG	SE 11. (CONTINUED)										
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:		<u> </u>	S	STEM ID#					
T	City of Bardstown DBA	Bardstown Ca	able			029525					
	SUM OF DSEs OF CATEGOR										
	Add the DSEs of each station										
	Enter the sum here and in line	1 of part 5 of this	schedule.		1.25						
	Instructions:					1					
2	In the column headed "Call	Sign": list the call	signs of all distant stations	identified by t	the letter "O" in column 5						
	of space G (page 3).  In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-										
Computation of DSEs for	mercial educational station, gi			= as "1.0"; for	each network or noncom-						
Category "O"	mercial educational station, gr	IS: DSEe									
Stations	CALL SIGN	DSE	CATEGORY "O" STATION  CALL SIGN	DSE	CALL SIGN	DSE					
Otations	WKYT-1	0.250	O/ LE CICIT	BOL	O/ IEE OIOIT	DOL					
	WKYT-2	1.000				<b></b>					
	WICH 1-2	1.000									
Add rows as						 					
necessary.				<b> </b>		<u> </u>					
Remember to copy											
all formula into new											
rows.											
		·				<b></b>					
						<b></b>					
						<u> </u>					
						<u> </u>					
						<u> </u>					

Name		town DBA Bardsto	wn Cable				S	029525	
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.									
Capacity		C	ATEGORY	LAC STATIONS:	COMPUTAT	ION OF DSEs			
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	R JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAC VALUE	F 5. TYPE		SE	
			÷		=	x	=		
						x x			
			÷		=	x	=		
			÷		=	x	=		
						x x	=		
			÷	:		x	=		
	Add the DSEs of	OF CATEGORY LAC S f each station. n here and in line 2 of p		nedule,	▶	0.00			
Computation of DSEs for Substitute-Basis Stations	Was carried I tions in effect Broadcast on space I).     Column 2: Four at your option. Toolumn 3: Ecolumn 4: D	by your system in substat on October 19, 1976 ( the or more live, nonnetwor each station give the his figure should correct the number of days ivide the figure in columnis is the station's DSE	itution for a pro as shown by the ork programs di- number of live spond with the s in the calenda in 2 by the figu (For more infor-	ogram that your system letter "P" in column uring that optional carries, nonnetwork program information in space I. ar year: 365, except in tre in column 3, and girmation on rounding, s	was permitted 7 of space I); an iage (as shown by s carried in substance I); an iage (as shown by s carried in substance I) are the result in cee page (viii) of	with the word "Yes" in column is stitution for programs that olumn 4. Round to no les the general instructions in	2 of were deleted s than the third	rm).	
				BASIS STATION			1		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAF	'S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	
		+		=		÷		=	
		÷	-	=		÷		=	
		+	-	=		÷		=	
		÷	-	=		÷		=	
	Add the DSEs of	OF SUBSTITUTE-BAS	IS STATIONS:			0.00			
5		R OF DSEs: Give the am applicable to your syster		boxes in parts 2, 3, and	4 of this schedul	le and add them to provide	the tota		
Total Number	1. Number of I	DSEs from part 2 ●				<b>-</b>	1.25		
of DSEs	2. Number of l	DSEs from part 3 ●				<u> </u>	0.00		
	3. Number of I	DSEs from part 4 ●				<u> </u>	0.00		
	TOTAL NUMBER	R OF DSEs						1.25	

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2017/1

LEGAL NAME OF C	OWNER OF CABLE		ble				S	YSTEM ID# 029525	Name
In block A: • If your answer if schedule.	ck A must be com "Yes," leave the re	emainder of p	-	7 of the DSE sche	edule blank a	nd complete pa	art 8, (page 16) of	the	6
n your unower ii	110, complete bi			TELEVISION M	ARKETS				Computation of
effect on June 24,	1981?	eschedule—E C below.	OO NOT COM	aller markets as de PLETE THE REM	AINDER OF F	PART 6 AND 7		gulations in	3.75 Fee
Column 1: CALL SIGN	under FCC rules	and regulatione DSE Sche	ons prior to Ju dule. (Note: Ti	part 2, 3, and 4 o ne 25, 1981. For fo he letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see the	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carri 76.61(b)(c)] B Specialty stati C Noncomeric D Grandfathere instructions fc E Carried pursu *F A station pre	ules and regued pursuant to as defined all educations of station (76.0 or DSE sched ant to individuationally carries). The station we would be station we station to the station to the station to the station we station to the station we station to the s	lations cited b to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag lule). ual waiver of F ed on a part-tir vithin grade-B	ne or substitute ba contour, [76.59(d)(	se in effect of 6.57, 76.59(b) (e)(1), 76.63(a) referring betitution of gossis prior to June 16.57, 76.63 (a) sis prior to June 16.57, 76.59 (b)	n June 24, 198 a), 76.61(b)(c), a) referring to 7 g to 76.61(d) irandfathered s une 25, 198	76.63(a) referring		
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column		complete the v	vorksheet on page	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WKYT-1	D	0.25							
WKYT-2	D	1.00							
							<u></u>		
							<b>†</b>		
						•		<u> </u>	
								1.25	
		В	LOCK C: CC	MPUTATION OF	- 3.75 FEE				
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule					
Line 2: Enter the	sum of permitte	ed DSEs from	m block B ab	ove					
				r of DSEs subject 7 of this schedu		rate.	,		
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375	and enter su	um here				x		permited/ partially nonpermitted
Line 6: Enter tot	al number of DS	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 a	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

	F OWNER OF CABLE		able				S'	YSTEM ID# 029525	Name
	1	BLOCK	A: TELEVI	SION MARKETS	S (CONTIN	UED)	_	T	_
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
					<u> </u>				
<u></u>					<u> </u>				
		<u> </u>			<u> </u>				
		<b></b>							
					ļ				
					<u> </u>				
		Ī	<u> </u>		T			I	1

Name	City of Bardsto			e					S	YSTEM ID# 029525	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.  A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections										
		PERMITT	ED DSE FOR STA	ATIONS CARRII	ED	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS			_
İ	1. CALL SIGN	2. PRIO	OR 3. AC	COUNTING		4. BASIS OF CARRIAGE	5. PF	RESENT	6. P	ERMITTED DSE	
											-
7 Computation of the	1	"Yes," comple	ete blocks B and C	,	pa	art 8 of the DSE sched	ule.				_
Syndicated			BLOC	K A: MAJOR	TI	ELEVISION MARK	ET				
Exclusivity Surcharge	• le any portion of the	cable evetem v	vithin a ton 100 mai	or tolovision mar	·ko	t as defned by section 7	6 5 of ECC	rules in effect l	uno 24	10912	
Surcharge	X Yes—Complete	•		or television mai	ΝC	No—Proceed to		iules III ellect J	une 24,	1901:	
	BLOCK B: C:	arriage of VHI	F/Grade B Contou	Stations		BI OCK	C: Compu	tation of Exem	int DSE	<u> </u>	_
	Is any station listed in commercial VHF stati or in part, over the ca	block B of pa	art 6 the primary st	ream of a		Was any station listed nity served by the cab to former FCC rule 76	l in block B le system p	of part 7 carrie	d in any	commu-	
	Yes—List each s  X No—Enter zero a		th its appropriate per part 8.	mitted DSE		Yes—List each st  X No—Enter zero a			ate permi	tted DSE	
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	iN	DSE	
			-								
			-								
				<u>.</u>			<b> </b>				
				<u>-</u>			<b> </b>				
							<del> </del>				
							<u> </u>				
	TOTAL DSEs 0.00 TOTAL DS									0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: City of Bardstown DBA Bardstown Cable	SYSTEM ID# 029525	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,001,918.38	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC?  Yes—Complete section 3 below.  X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      X Yes—Complete part 9 of this schedule.      No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge.		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
	OF OTION 4. OF OONE SO TELEVIOLON MARKET		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  X Yes—Complete part 9 of this schedule.  No—Complete the applicable section below.		
	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 D 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)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#							
	(	City of Bardstown DBA Bardstown Cable	029525							
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.								
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)								
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1)								
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here								
		D. Enter 0.00089 of gross receipts (the amount in section 1)								
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here								
		F. Multiply line D by line E and enter here								
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)								
		Syndicated Exclusivity Surcharge.								
8 Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local service" area and others were located outside that area. For the definition of a station's "local service" area and others were located outside that area.	elow							
	service area," see page (v) of the general instructions.									
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS									
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?								
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.								
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE								
	Section 1	Enter the amount of gross receipts from space K (page 7)	.38_							
	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.).	1.25							
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.								
		A. Enter 0.01064 of gross receipts  (the amount in section 1)	.41_							
		B. Enter 0.00701 of gross receipts  (the amount in section 1) ▶ _ \$ 7,023.45								
		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	.86_							
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	12,416.27							
		Base Rate Fee	<u> </u>							

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2017/1

LEGAL NAME OF OWNER OF CABLE SYSTEM:  City of Bardstown DBA Bardstown Cable	SYSTEM ID# 029525	Name
Section If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.		
A. Enter 0.01064 of gross receipts  (the amount in section 1)		8
B. Enter 0.00701 of gross receipts (the amount in section 1)	-	Computation of Base Rate Fee
C. Multiply line B by 3.000 and enter here ▶\$		Duod Nato i oo
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 <u>\$</u>		
G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00	
<b>IMPORTANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of t instead be reported on a community-by-community basis (subscriber groups) if the cable system reported Space G.		9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing y receipts from subscribers located within the station's local service area, from your system's total gross re exclusion, you must:		Computation of Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable sy DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for	ystem. Determine the number of e base rate fee for each group.	and Syndicated Exclusivity Surcharge
NOTE: If any portion of your cable system is located within the top 100 television market and the station also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both if your cable system is wholly located outside all major television markets, complete block A only.	is not exempt in part 7, you must	for Partially Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
<b>Step 1:</b> For each community served, determine the local service area of each wholly distant and each parameter to that community.	artially distant station you	Stations
<b>Step 2:</b> For each wholly distant and each partially distant station you carried, determine which of your su outside the station's local service area. A subscriber located outside the local service area of a station is the same token, the station is distant to the subscriber.)		
<b>Step 3:</b> Divide your subscribers into subscriber groups according to the complement of stations to which subscriber group must consist entirely of subscribers who are distant to exactly the same complement of system will have only one subscriber group when the distant stations it carried have local service areas to	f stations. Note that a cable	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for groups.  In each section:	r each of your system's subscriber	
Identify the communities/areas represented by each subscriber group.		
<ul> <li>Give the call sign for each of the stations in the subscriber group's complement—that is, each station the subscribers in the group.</li> <li>If:</li> </ul>	hat is distant to all of the	
<ol> <li>your system is located wholly outside all major and smaller television markets, give each station's DS and 4 of this schedule; or,</li> </ol>	E as you gave it in parts 2, 3,	
2) any portion of your system is located in a major or smaller televison market, give each station's DSE a part 6 of this schedule.	as you gave it in block B,	
• Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
<ul> <li>Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (v in the paper SA3 form.</li> </ul>	ii) of the general instructions	
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this page. In making this computation, use the DSE and gross receipts figure applicable to the particular sub DSEs for that group's complement of stations and total gross receipts from the subscribers in that group.	oscriber group (that is, the total	

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

actual calculations on the form.

# SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 029525 City of Bardstown DBA Bardstown Cable Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE						S	029525	Name
В	LOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	Р		SECOND	SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	Nelson	County		COMMUNITY/ AREA	Washin	Washington County		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
WKYT-1	0.25							Base Rate F
WKYT-2	1.00							and
								Syndicated
			***************************************					Exclusivity
			<b>+</b>	-				Surcharge
•••••								for
								Partially
	·		<b>+</b>			<b>+</b>		Distant
	···		<b></b>			<b></b>	·····	Stations
	····		<b>+</b>		<u>.</u>	<b>+</b>	·····	Stations
			<b></b>			H	·····	
	···		<del> </del>		<del> </del>	H	····	
	<b></b>		<b></b>		<b></b>	H		
	- <b> </b>		<b></b>		<b></b>			
			<b></b>		<b></b>			
Γotal DSEs			1.25	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 997	,105.12	Gross Receipts Secon	d Group	\$	4,813.26	
Base Rate Fee First G	roup	\$ 12	356.63	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	P		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<b>*</b> ·······					
			<b>*</b> ·······					
			<b>†</b>		<b>†</b>	<b>1</b>		
			<b>†</b>		<b>†</b>	H		
			<b>†</b>		<b>+</b>	H		
	-		<b>†</b>		<b>†</b>	H		
	-		<b>†</b>		<b>†</b>	<del></del>		
			<b></b>			<del> </del>		
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	<u> </u>	0.00	Gross Receipts Fourth	Group	\$	0.00	
2.300 . 1300ipto 11iii u C	<b></b>	-		3.000 Noosipto i oditii	. <b>.</b>	*		
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th	ne <b>base rat</b>	e fees for each subsci	riber group	as shown in the boxes a	bove.			
Enter here and in block			. J. J. J.	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	- <del>-</del> -	\$	12,356.63	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  City of Bardstown DBA Bardstown Cable  029525								
Bi	LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EACH	SUBSCF	RIBER GROUP		
	FIRST	SUBSCRIBER GRO	UP	SECOND SUBSCRIBE			UP	^
COMMUNITY/ AREA	Nelson	County		COMMUNITY/ AREA	Washington County			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
						-		Syndicated
	···	<b>-</b>	···			<b>-</b>	······	
		H	<mark></mark>			H	<del></del>	Exclusivity
	<mark></mark>	<b> </b>	<mark></mark>			<b></b>		Surcharge
								for
								Partially
								Distant
					·····	+		Stations
	············	H	<b></b>			+		Glations
		H	<u></u>			H	·····	
		<b> </b>			<b></b>	<u> </u>		
	<u> </u>							
	··		<del> </del>			•	·····	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 997	7,105.12	Gross Receipts Secon	d Group	\$	4,813.26	
Base Rate Fee First G	roun	•	0.00	Base Rate Fee Secon	d Group	\$	0.00	
Base Rate Fee First Group \$ 0.00				Side Nate 1 55 Second Group				
THIRD SUBSCRIBER GROUP				FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	······································	H	···			+	·····	
	···	H	<mark></mark>			-	·····	
		<b> </b>	<mark></mark>				<del></del>	
		<u> </u>			ļ			
							····	
	··	H	<del> </del>		<b> </b>	H	·····	
		H	<b></b>		ļ		<del></del>	
		H	<u></u>		ļ	<b></b>	<u></u>	
	<u> </u>							
Total DSEs		Ш	0.00	Total DSEs			0.00	
	<del>-</del>							
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00		
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
			_ <del></del>	<u> </u>				
			criber group	as shown in the boxes a	above.	¢	0.00	
inter here and in block	s, iine 1,	space L (page /)				\$	0.00	

ACCOUNTING PERIOD: 2017/1

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name City of Bardstown DBA Bardstown Cable 029525 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **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 and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . . THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown