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

STATEMENT OF ACCOUNT

for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

SA3E Long Form

Return completed workbook by email to:

AMOUNT

ALLOCATION NUMBER

FOR COPYRIGHT OFFICE USE ONLY

\$

DATE RECEIVED

02/20/2018

coplicsoa@loc.gov

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

Α	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting		2017/2				
Period						
B Owner	rate	tructions: Give the full legal name of the owner of the cable system. If the owner is a title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner ingle statement of account and royalty fee payment covering the entire acco Check here if this is the system's first filing. If not, enter the system's ID	ess of the cable syste or on the last day of the pounting period.	m. e accounting period should su		62045
	LE	GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
		Heart of Iowa Communications Cooperative				
					6204	520172
					62045	2017/2
		PO Box 130				
		Union, IA 50258-0130				
С		STRUCTIONS: In line 1, give any business or trade names used to nes 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		tructions: For complete space D instructions, see page 1b. Identif n all communities.	y only the frst com	munity served below and re	elist on pag	ge 1b
Area Served	witi	CITY OR TOWN	STATE			
First		Union	IA			
Community	В	elow is a sample for reporting communities if you report multiple ch	nannel line-ups in S	pace G.		
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB	GRP#
Sample	Ald		MD	A		1
		ance	MD	В		2
	Ger	ing	MD	В		3
form in order to pro numbers. By provid search reports prep	ocess ding P pared	tion 111 of title 17 of the United States Code authorizes the Copyright Offce to colle your statement of account. PII is any personal information that can be used to identit II, you are agreeing to the routine use of it to establish and maintain a public record, for the public. The effect of not providing the PII requested is that it may delay proce	y or trace an individual, which includes appearing ssing of your statement	such as name, address and telep ng in the Offce's public indexes ar of account and its placement in th	hone nd in	
completea recora a	n state	ements of account, and it may affect the legal suffciency of the fling, a determination	inal would be made by			

FORM SA3	E. PAGE 1b.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID# 62045					
Heart of Iowa Communications Cooperative	62043	' 				
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.						
Note: Entities and properties such as hotels, apartments, condomir below the identified city or town.	niums, or mobile home parks should be reported in parentheses					
If all communities receive the same complement of television broad all communities with the channel line-up "A" in the appropriate colur on a partially distant or partially permitted basis in the DSE Schedul designated by a number (based on your reporting from Part 9).						
When reporting the carriage of television broadcast stations on a co channel line-up designated by an alpha-letter(s) (based on your Sp (based on your reporting from Part 9 of the DSE Schedule) in the a	ace G reporting) and a subscriber group designated by a number					
CITY OR TOWN	STATE CH LINE UP SUB GRP#					
Union	IA AC & AD	First				
Albion	IA AC & AD	Community				
Liscomb	IA AC & AD					
New Providence	IA AC & AD					
Haverhill	IA AC & AD					
Ferguson	IA AC & AD	See instructions for				
Conrad	IA AA & AB	additional information				
Beaman	IA AA & AB	on alphabetization.				
Eldora	IA AC & AD					
Laurel	IA AC & AD					
Steamboat Rock	IA AC & AD					
Unicorporated Areas:		Add rows as necessa				
Hardin County	IA AC & AD					
Marshall County Grundy County	IA AC & AD					
Grundy County	IA AA & AB					
		.				
		.				
		.				
		.				
		.				
		.				
		.				
		.				

N	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	YSTE	M ID
Name	Heart of Iowa Communi	ications Co	opera	tive					6	204
	SECONDARY TRANSMISSION		UBSCE		RATES					
E	In General: The information in s			-	-	ry transmission	service of	the cable		
	system, that is, the retransmissi									
Secondary	about other services (including p						those exis	ting on the		
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Bot						able system	n, broken		
scribers and	down by categories of secondar	•					2			
Rates	each category by counting the n							s charged		
	separately for the particular server Rate: Give the standard rate of							ae and the		
	unit in which it is generally billed	-						-		
	category, but do not include dise	• •		,	•					
	Block 1: In the left-hand block									
	systems most commonly provide that applies to your system. Not									
	categories, that person or entity			-		-				
	subscriber who pays extra for ca	able service to	additio	nal sets would	be include	d in the count u	nder "Serv	ice to the		
	first set" and would be counted						a different.			
	Block 2: If your cable system printed in block 1 (for example,	-		•						
	with the number of subscribers					•	,	-		
	sufficient.		•							
	BLO	OCK 1 NO. OF					BLOC	K 2 NO. OF		
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	GORY OF SE	RVICE	SUBSCRIBERS	RÆ	λΤΕ
	Residential:									
	Service to first set		1,006	\$ 85.00		ial Local Chan		64	\$	25.0
	Service to additional set(s)					ical Local Cha	nnels Onl	7	\$	25.0
	• FM radio (if separate rate) Motel, hotel				Commer			1	\$ 2 \$ 2	205.1
	Commercial		40		Commer Commer			1		240.0 200.0
	Converter			\$ 85.00		e Obiligation 1			\$	-
	Residential					e serv 1st Set		13	\$	60.5
	Non-residential									
	SERVICES OTHER THAN SEC		-		-					
F	In General: Space F calls for ran not covered in space E, that is,	•	,		•	• •				
•	service for a single fee. There a									
Services	furnished at cost or (2) services									
Other Than	amount of the charge and the un		susuall	y billed. If any	rates are cl	harged on a vai	iable per-p	rogram basis,		
Secondary Fransmissions:	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.									
Rates				•		••		t were not		
	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.									
	brief (two- or three-word) descri	ption and inclu	de the l	rate for each.		<u> </u>				
	brief (two- or three-word) descri	ption and inclu		rate for each.				BLOCK 2		
	brief (two- or three-word) descri		CK 1	GORY OF SEI	RVICE	RATE	CATEGO	BLOCK 2 RY OF SERVICE	RÆ	ATE
	CATEGORY OF SERVICE Continuing Services:	BLO	CK 1 CATE Install	GORY OF SEI ation: Non-re		RATE		RY OF SERVICE	RA	
	CATEGORY OF SERVICE Continuing Services: • Pay cable	BLO	CK 1 CATEO Install • Mo	GORY OF SEI ation: Non-re otel, hotel		RATE	HBO Plex		\$	15.9
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel	BLO	CK 1 CATE Install • Mc • Co	GORY OF SEI ation: Non-re otel, hotel ommercial		RATE	HBO Plex Cinemax	RY OF SERVICE x Plex	\$ \$	15.9 13.9
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection	BLO	CK 1 CATEO Install • Mo • Co • Pa	GORY OF SEI ation: Non-re otel, hotel ommercial y cable	sidential	RATE	HBO Plez Cinemax HBO/Cin	RY OF SERVICE x Plex emax Combo Ple	\$ \$ \$	15.9 13.9 27.9
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection	BLO	CK 1 CATE Install • Mc • Co • Pa • Pa	GORY OF SEI ation: Non-re otel, hotel ommercial y cable y cable y cable-add'l c	sidential	RATE	HBO Plex Cinemax HBO/Cin Showtim	RY OF SERVICE x Plex emax Combo Ple e/TMC/FLIX	\$ \$ \$	15.9 13.9 27.9 13.9
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection	BLO	CK 1 CATEC Install • Mc • Co • Pa • Pa • Fir	GORY OF SEI ation: Non-re otel, hotel ommercial y cable	sidential hannel	RATE	HBO Plez Cinemax HBO/Cin	RY OF SERVICE x Plex emax Combo Ple e/TMC/FLIX	\$ \$ \$	15.9 13.9 27.9 13.9 13.9
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	BLO0 RATE 	CK 1 CATE Install • Mc • Co • Pa • Pa • Fir • Bu	GORY OF SEI lation: Non-re btel, hotel mmercial y cable y cable-add'l c e protection	sidential hannel	RATE	HBO Plex Cinemax HBO/Cin Showtim STARZ P Playboy	RY OF SERVICE x Plex emax Combo Ple e/TMC/FLIX	\$ \$ \$ \$ \$	15.9 13.9 27.9
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	BLO0 RATE 	CK 1 CATE Install • Mo • Co • Pa • Pa • Fir • Bu Other	GORY OF SEI lation: Non-re btel, hotel mmercial y cable y cable-add'l c e protection rglar protectio	sidential hannel	RATE	HBO Plex Cinemax HBO/Cin Showtim STARZ P Playboy	RY OF SERVICE x Plex emax Combo Ple e/TMC/FLIX 'lex	\$ \$ \$ \$ \$	15.9 13.9 27.9 13.9 13.9 13.9 14.9
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	BLO0 RATE 	CK 1 CATE(Install • Mc • Co • Pa • Pa • Fir • Bu Other • Re	GORY OF SEI lation: Non-re btel, hotel ommercial y cable y cable-add'l c e protection rglar protection services:	sidential hannel	RATE	HBO Plex Cinemax HBO/Cin Showtim STARZ P Playboy	RY OF SERVICE x Plex emax Combo Ple e/TMC/FLIX 'lex	\$ \$ \$ \$ \$	15.9 13.9 27.9 13.9 13.9 13.9 14.9
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	BLO0 RATE 	CK 1 CATEC Install • Mc • Co • Pa • Pa • Fin • Bu • Bu • Cother • Re • Dis • Ou	GORY OF SEI ation: Non-re otel, hotel ommercial y cable y cable-add'l c e protection rglar protection services: econnect	sidential hannel	RATE	HBO Plex Cinemax HBO/Cin Showtim STARZ P Playboy	RY OF SERVICE x Plex emax Combo Ple e/TMC/FLIX 'lex	\$ \$ \$ \$ \$	15.9 13.9 27.9 13.9 13.9 13.9 14.9

I	FORM SA3E. PAGE 3.		
	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name

LEGAL NAME OF OWNE	ER OF CABLE SY	STEM:			SYSTEM ID	Nama
Heart of Iowa C	ommunicat	ions Coop	erative		6204	5 Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
carried by your cable s	ystem during t	he accounting	g period except	(1) stations carrie	ns and low power television stations) ed only on a part-time basis undei	G
0		,	<i>i</i> 0	0	rtain network programs [section: ; and (2) certain stations carried on a	Primary
substitute program bas	is, as explaine	d in the next	paragraph			Transmitters:
				is carried by your	cable system on a substitute progran	Television
basis under specifc FCDo not list the station	, 0	,		he Special Stater	nent and Program Log)—if the	
station was carried of						
	formation conc				titute basis and also on some othe of the general instructions located	
		•	•		es such as HBO, ESPN, etc. Identify	
			•	Ũ	ation. For example, report multi ch stream separately; for example	
WETA-simulcast).				,		
			-		ation for broadcasting over-the-air ir s may be different from the channe	
on which your cable sy					s may be different nom the channe	
					dependent station, or a noncommercia	
					icast), "I" (for independent), "I-M commercial educational multicast)	
For the meaning of the	se terms, see	page (v) of th	e general instru	uctions located in	the paper SA3 form	
Column 4: If the sta planation of local service				-	/es". If not, enter "No". For an ex ne paper SA3 form	
Column 5: If you ha	ave entered "Y	es" in column	4, you must co	omplete column 5	, stating the basis on which you	
cable system carried th carried the distant station					ntering "LAC" if your cable syster	
carried the distant stati	on on a part-til	The basis beca				
For the retransmissi	ion of a distant		eam that is not	subject to a royal		
-	entered into o	multicast stre	une 30, 2009, b	etween a cable s	ystem or an association representin	
of a written agreement the cable system and a	entered into or a primary trans	: multicast stre n or before Ju mitter or an a	une 30, 2009, b issociation repr	etween a cable s esenting the prim	ystem or an association representin ary transmitter, enter the designa	
of a written agreement the cable system and a tion "E" (exempt). For s	entered into or a primary trans simulcasts, also	multicast stre n or before Ju mitter or an a o enter "E". If	une 30, 2009, b issociation repr you carried the	etween a cable s esenting the prim e channel on any	ystem or an association representin	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	entered into or a primary trans simulcasts, also ree categories e location of ea	multicast stre n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo	une 30, 2009, b issociation repr you carried the) of the general or U.S. stations,	etween a cable s esenting the prim e channel on any l instructions loca , list the communi	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C	entered into or a primary trans simulcasts, also ree categories e location of ea Canadian statio	multicast stru n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo ns, if any, giv	une 30, 2009, b issociation repre- you carried the) of the general or U.S. stations, ve the name of t	etween a cable s esenting the prim e channel on any l instructions loca , list the communi the community wi	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the th which the station is identifec	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	entered into or a primary trans simulcasts, also ree categories e location of ea Canadian statio	multicast stro n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo ns, if any, giv nnel line-ups,	une 30, 2009, b issociation repre- you carried the) of the general or U.S. stations, ve the name of t	etween a cable s esenting the prim e channel on any o l instructions loca , list the communit the community wi e space G for eac	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the th which the station is identifec	
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of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizing 1. CALL	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio g multiple char 2. B'CAST	multicast stro n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo ons, if any, giv nnel line-ups, CHANNI 3. TYPE	une 30, 2009, b association repri- you carried the) of the general or U.S. stations, re the name of f use a separate EL LINE-UP 4. DISTANT?	etween a cable s esenting the prim e channel on any of instructions local , list the communit the community wi e space G for eac AA 5. BASIS OF	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the th which the station is identifec	_
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizing	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio g multiple char	multicast stro n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo ons, if any, giv nnel line-ups, CHANNI	une 30, 2009, b association repri- you carried the) of the general or U.S. stations, ve the name of t use a separate	etween a cable s esenting the prim e channel on any o l instructions loca , list the communit the community wi e space G for eac AA	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the th which the station is identifec h channel line-up.	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizing 1. CALL	entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio g multiple char 2. B'CAST CHANNEL	multicast stro n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo ons, if any, giv nnel line-ups, CHANNI 3. TYPE OF	une 30, 2009, b association repri- you carried the) of the general or U.S. stations, re the name of f use a separate EL LINE-UP 4. DISTANT?	etween a cable s esenting the prim e channel on any of instructions local , list the community with e space G for eac AA 5. BASIS OF CARRIAGE	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the th which the station is identifec h channel line-up.	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN	entered into o a primary trans simulcasts, also ree categories a location of ea canadian statio g multiple char 2. B'CAST CHANNEL NUMBER	multicast stro n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo ons, if any, giv nnel line-ups, CHANNI 3. TYPE OF STATION	une 30, 2009, b association repri- you carried the) of the general or U.S. stations, ve the name of t use a separate EL LINE-UP 4. DISTANT? (Yes or No)	etween a cable s esenting the prim e channel on any of instructions local , list the community wi e space G for eac AA 5. BASIS OF CARRIAGE	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the th which the station is identifec h channel line-up. 6. LOCATION OF STATION	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN KGAN CBS	entered into o a primary trans simulcasts, also ree categories location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 2	multicast stro n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fo ons, if any, giv nnel line-ups, CHANNI 3. TYPE OF STATION	une 30, 2009, b issociation repri- you carried the) of the general or U.S. stations, re the name of i use a separate EL LINE-UP 4. DISTANT? (Yes or No) No	etween a cable s esenting the prim e channel on any of instructions local , list the community wi e space G for eac AA 5. BASIS OF CARRIAGE	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifec h channel line-up. 6. LOCATION OF STATION Cedar Rapids, IA	additional information
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN KGAN CBS KPXR ION	entered into o a primary trans simulcasts, also ree categories location of ea Canadian statio g multiple char 2. B'CAST CHANNEL NUMBER 2 4 7	multicast stro n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fc ons, if any, giv nnel line-ups, CHANNI 3. TYPE OF STATION N	une 30, 2009, b issociation repri- you carried the) of the general or U.S. stations, ve the name of t use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No	etween a cable s esenting the prim e channel on any of instructions local , list the community wi e space G for eac AA 5. BASIS OF CARRIAGE	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the th which the station is identifec h channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION Cedar Rapids, IA Cedar Rapids, IA	
of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN KGAN CBS KPXR ION KWWL NBC	entered into o a primary trans simulcasts, also ree categories a location of ea canadian statio g multiple chan 2. B'CAST CHANNEL NUMBER 2 4	multicast stro n or before Ju mitter or an a o enter "E". If , see page (v ch station. Fc uns, if any, giv nnel line-ups, CHANNI 3. TYPE OF STATION N I N	une 30, 2009, b issociation repri- you carried the) of the general or U.S. stations, re the name of t use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No	etween a cable s esenting the prim e channel on any of instructions local , list the community wi e space G for eac AA 5. BASIS OF CARRIAGE	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the th which the station is identifec h channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION Cedar Rapids, IA Cedar Rapids, IA Waterloo, IA	additional information
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F	FORM SA3E. PAGE 3.		
	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name

LEGAL NAME OF OWNE	ER OF CABLE SY	STEM:			SYSTEM ID#	Namo
Heart of Iowa C	ommunicat	tions Coop	perative		62045	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	NC				
carried by your cable s	system during t	he accounting	g period except	(1) stations carri	ns and low power television stations) ed only on a part-time basis under	G
0		,	<i>,</i> 1	0	rtain network programs [section: ; and (2) certain stations carried on a	Primary
substitute program bas	sis, as explaine	ed in the next	paragraph			Transmitters:
		-	•	ns carried by your	cable system on a substitute progran	Television
basis under specifc FCDo not list the station				he Special Stater	nent and Program Log)—if the	
station was carried						
	formation cond				titute basis and also on some othe of the general instructions located	
		-	•		xes such as HBO, ESPN, etc. Identify nation. For example, report multi	
			•	•	ch stream separately; for example	
WETA-simulcast).			has assigned to	the television of	tion for broodcosting over the sinis	
			-		ation for broadcasting over-the-air ir s may be different from the channe	
on which your cable sy	stem carried t	he station		0		
					dependent station, or a noncommercia icast), "I" (for independent), "I-M	
					commercial educational multicast)	
For the meaning of the						
planation of local service					Yes". If not, enter "No". For an ex ne paper SA3 form	
Column 5: If you ha	ave entered "Y	es" in columr	n 4, you must co	omplete column 5	, stating the basis on which you	
cable system carried th carried the distant stati					ntering "LAC" if your cable syster	
					ty payment because it is the subjec	
For the retransmissi	ion of a distan					
of a written agreement	entered into o	n or before J			ystem or an association representin	
of a written agreement the cable system and a	entered into o a primary trans	n or before J mitter or an a	association repr	esenting the prim	ary transmitter, enter the designa	
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of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	entered into o a primary trans simulcasts, als ree categories e location of ea	n or before J mitter or an a o enter "E". If s, see page (v ach station. Fo	association repr f you carried the /) of the general or U.S. stations	esenting the prim channel on any l instructions loca , list the commun	ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the	
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FORM SA3E. PAGE 3.		
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	

LEGAL NAME OF OW	NER OF CABLE SY	STEN.			SYSTEM ID#	
Heart of Iowa	Communicat	ions Coop	oerative		62045	Namo
PRIMARY TRANSMIT	TERS: TELEVISIO	NC				
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis basis under specifc F	system during t ations in effect of (6.61(e)(2) and (asis, as explaine Stations: With CC rules, regula	he accounting n June 24, 19 (4), or 76.63 (ed in the next respect to an ations, or aut	g period except 081, permitting t (referring to 76.0 paragraph y distant station horizations:	(1) stations carri- the carriage of ce 61(e)(2) and (4))] as carried by your	ns and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a cable system on a substitute progran	G Primary Transmitters: Television
 station was carried List the station here basis. For further i in the paper SA3 f Column 1: List ea each multicast stream cast stream as "WET 	d only on a subs , and also in spa information conc orm. ach station's call n associated wit	titute basis ace I, if the st cerning substi sign. Do not h a station ac	ation was carrie itute basis static report originatic ccording to its o	ed both on a subs ons, see page (v) on program servic ver-the-air design	nent and Program Log)—if the titute basis and also on some othe of the general instructions located res such as HBO, ESPN, etc. Identify lation. For example, report multi ch stream separately; for example	
its community of licer on which your cables Column 3: Indicat educational station, b (for independent mult For the meaning of th Column 4: If the s planation of local ser Column 5: If you cable system carried carried the distant sta For the retransmis	nse. For example system carried the terin each case we by entering the le- ticast), "E" (for n nese terms, see station is outside vice area, see pr have entered "Y the distant station ation on a part-til ssion of a distant	e, WRC is Ch he station whether the s etter "N" (for r oncommercia page (v) of the the local ser age (v) of the es" in column on during the me basis bec t multicast str	hannel 4 in Was station is a network), "N-M" al educational), he general instru- vice area, (i.e. ' general instruc- n 4, you must co- accounting per cause of lack of ream that is not	hington, D.C. Thi ork station, an inc (for network mult or "E-M" (for non- uctions located in 'distant"), enter "Y tions located in th omplete column 5 iod. Indicate by e activated channe subject to a royal	res". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you ntering "LAC" if your cable syster I capacity Ity payment because it is the subjec	
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FORM SA3E. PAGE 3.		
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
		Name

LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#	
Heart of Iowa	Communicat	ions Coop	erative		62045	Name
PRIMARY TRANSMITT	ERS: TELEVISIO					
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis basis under specifc F • Do not list the statio station was carried • List the station here basis. For further i in the paper SA3 fi Column 1: List ea each multicast stream	G, identify ever system during t tions in effect or 6.61(e)(2) and (asis, as explaine Stations: With CC rules, regula n here in space d only on a subs , and also in spa nformation concorre. ch station's call n associated wit	y television si he accounting n June 24, 19 (4), or 76.63 (ed in the next respect to any ations, or auth G—but do lis titute basis ace I, if the st cerning substi sign. Do not h a station ac	g period except 81, permitting ti referring to 76.6 paragraph y distant station norizations: st it in space I (th ation was carried tute basis static report originatio cording to its ov	(1) stations carrie he carriage of ce 51(e)(2) and (4))] is carried by your he Special Stater ed both on a subs ons, see page (v) on program servic ver-the-air design	as and low power television stations) ed only on a part-time basis under rtain network programs [sections ; and (2) certain stations carried on a cable system on a substitute program nent and Program Log)—if the titute basis and also on some othe of the general instructions located res such as HBO, ESPN, etc. Identify nation. For example, report multi ch stream separately; for example	G Primary Transmitters: Television
its community of licen on which your cables Column 3: Indicat educational station, b (for independent mult For the meaning of th Column 4: If the s planation of local serv Column 5: If you H cable system carried carried the distant sta For the retransmis of a written agreemen the cable system and tion "E" (exempt). For explanation of these t Column 6: Give th	se. For example system carried the e in each case of y entering the le icast), "E" (for n ese terms, see tation is outside vice area, see pro- have entered "Y the distant static tion on a part-ti sion of a distant t entered into o a primary trans s simulcasts, als hree categories he location of ea Canadian static	e, WRC is Ch he station whether the s etter "N" (for n oncommercia page (v) of the the local ser age (v) of the res" in column on during the me basis bec t multicast strr n or before Ju mitter or an a o enter "E". If a, see page (v och station. Fo ons, if any, giv	tation is a network, "N-M" al educational), " e general instru- vice area, (i.e. " general instruc of 4, you must co accounting peri ause of lack of a eam that is not une 30, 2009, b issociation repre- you carried the of the general or U.S. stations, ve the name of t	hington, D.C. Thi ork station, an inc (for network mult or "E-M" (for non- citions located in 'distant"), enter "\ tions located in th omplete column 5 iod. Indicate by e activated channe subject to a royal etween a cable s esenting the prime channel on any instructions loca list the community wi	Yes". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you ntering "LAC" if your cable syster I capacity ty payment because it is the subjec ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifec	
		CHANN	EL LINE-UP	AD		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
KCCI HD CBS	508	N	NO		Des Moines, IA	
KFPX HD ION	510	I	NO		Cedar Rapids, IA	
KDIN HD IPTV	511	E	NO		Des Moines, IA	
KCWI HD CW	512	 I	NO		Des Moines, IA	
WHO HD CBS	513	N	NO		Des Moines, IA	
KDSM HD FOX	517	1	NO		Des Moines, IA	

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2017/2
LEGAL NAME OF OWNER OF Heart of Iowa Commu)			SYSTEM ID# 62045	Name
SUBSTITUTE CARRIAG	E: SPECIA		NT AND PROGRAM LOO	3			
In General: In space I, ident substitute basis during the a explanation of the programm form.	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorization	s. For a further	Substitute
 SPECIAL STATEMENT During the accounting per broadcast by a distant state 	riod, did you			is, any nonne	etwork television progra	am XNo	Carriage: Special Statement and Program Log
period, was broadcast by a under certain FCC rules, re SA3 form for futher informat titles, for example, "I Love I Column 2: If the programan Column 3: Give the call Column 4: Give the broat the case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes stated as "6:00–6:30 p.m."	E PROGRA titute progra ace, please of every no distant stat egulations, c tition. Do no Lucy" or "NE m was broad sign of the s adcast statio hadian statid natian statid th and day ve "5/7." es when the Example: a er "R" if the and regulati	MS im on a separa attach addition nnetwork telev- ion and that your authorization it use general 3A Basketball: dcast live, enter station broadca on's location (th ons, if any, the when your syster a substitute pro- a program carr listed program ons in effect do	ate line. Use abbreviations hal pages. rision program (substitute pour cable system substitute to cable system substitute categories like "movies", o 76ers vs. Bulls." rr "Yes." Otherwise enter "I asting the substitute progra he community to which the community with which the stem carried the substitute ogram was carried by your ied by a system from 6:01: n was substituted for progra	wherever po program) that ed for the pro- neral instructi r "basketball" No." am. station is lice station is lice program. Use cable system 15 p.m. to 6: amming that d; enter the le	ssible, if their meaning dramming of another s ons located in the pape '. List specific program ensed by the FCC or, in entified). e numerals, with the m h. List the times accura 28:30 p.m. should be your system was require enter "P" if the listed pro	is tation er n onth tely	
effect on October 19, 1976			·	WHE	EN SUBSTITUTE	7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	E PROGRAN 3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	IAGE OCCURRED 6. TIMES FROM – TO	FOR DELETION	
					<mark></mark>		
					<mark></mark>		
				<mark></mark>			

	LEGAL NAME OF	OWNER OF CABLI	E SYSTEM:						SYSTEM ID#	
Name	Heart of low	Heart of Iowa Communications Cooperative 62045								
J Part-Time Carriage Log	 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." 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.m12:00 p.m." 									
		1	DAT	ES AND HOURS	OF F	ART-TIME CAF	RIAGE			
	CALL SIGN	WHEN	I CARRIAGE OC	CURRED		CALL SIGN	WHEN	I CARRIAGE OC	CURRED	
	CALL SIGN	DATE		URS		CALL SIGN	DATE		DURS	
		DATE	FROM	TO	•		DATE	FROM	TO	
				-					<u> </u>	
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FORM	SA3E. PAGE 7.							
	L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name					
Hea	rt of Iowa Communications Cooperative	62045						
Inst all a (as page	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. IMPORTANT: You must complete a statement in space P concerning gross receipts.							
 Instru Con Con If yo feet If yo according 	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: uplete block 1, showing your minimum fee. uplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the and rom block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable pa ompanying this form and attach the schedule to your statement of account. rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be	arts of the DSE Schedule	L Copyright Royalty Fee					
bloc	k 3 below.							
	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be e low.	entered on line 2 in block						
▶ If pa	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be entered on line						
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.							
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	\$ 531,813.40						
	This is your minimum fee.	\$ 5,658.49						
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colun "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule.	nn 4, you must check						
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	#REF!						
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	#REF!						
	Line 3. Add lines 1 and 2 and enter here	#REF!						
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	#REF!	Cable systems					
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	0.00	submitting additional deposits under					
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing					
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	#REF!	appropriate form for submitting the					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (a general instructions located in the paper SA3 form for more information.)	See page (i) of the	additional fees.					

ACCOUNTING PERIO	UU: 2017/2	FORM SA3E. PAGE 8.
Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Heart of Iowa Communications Cooperative	62045
	CHANNELS	
Μ	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast	stations
<u>.</u>	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
Channels		
	1. Enter the total number of channels on which the cable	46
	system carried television broadcast stations	
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations	340
	and nonbroadcast services	
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Be Contacted		
for Further	Name Kathi Patten Telephone	641-486-2211
Information		
	Address PO Box 130	
	(Number, street, rural route, apartment, or suite number)	
	Union, IA 50258-0130 (City, town, state, zip)	
	()) (),»)	
	Email kpatten@heartofiowa.coop Fax (optional) 641-486	-2205
-	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulation)	ulations.)
Ο		
Certifcation	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as 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 identifed as ow	vner 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 are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith	ed 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/ Bryan Amundson	
	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 "E2"
	button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus com	
	Typed or printed name: Bryan Amundson	
	Title: General Manager	
	(Title of official position held in corporation or partnership)	
	Date: February 20, 2018	
l		
-	: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying informations are solved to identify or trace an individual such as name the solved to identify or trace an individual such as name and the solved to identify or trace an individual such as name and the solved to identify or trace an individual such as name and the solved to identify or trace an individual such as name and the solved to identify or trace an individual such as name and the solved to identify or trace and individual such as name and the solved to identify or trace and individual such as name and the solved to identify or trace and individual such as name and the solved to	

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 telephol 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 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 t 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 lay

FORM	SA3F	PAGE9.

LEGAL NAME OF OWNER OF CABLE S	YSTEM:		SYSTEM ID#	Nama				
Heart of Iowa Communica	tions Cooperative		62045	Name				
The Satellite Home Viewer Ac lowing sentence: "In determining the tota service of providing se	al number of subscribers and the gr condary transmissions of primary b	EIPTS EXCLUSIONS 111(d)(1)(A), of the Copyright Act by adding th oss amounts paid to the cable system for the b roadcast transmitters, the system shall not incl g secondary transmissions pursuant to section	asic ude sub-	P Special Statement Concerning				
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 sa		. e						
YES. Enter the total here Name Mailing Address	and list the satellite carrier(s) below	Name Mailing Address						
INTEREST ASSESSME	NTS	·						
		pritted as a result of a late payment or underparent or underparent instructions in the paper SA3 form.	ayment.	Q				
Line 1 Enter the amount of la	te payment or underpayment	x_		Interest Assessment				
Line 2 Multiply line 1 by the in	nterest rate* and enter the sum here	εx	- days					
Line 3 Multiply line 2 by the r	number of days late and enter the su		- 00274					
	274** enter here and on line 3, bloc ge 7)	<u>\$</u>	- t charge)					
	chart click on <i>www.copyright.gov/lic</i> vision at (202) 707-8150 or licensing	censing/interest-rate.pdf. For further assistance g@loc.gov.	eplease					
** This is the decimal equiv	valent of 1/365, which is the interest	t assessment for one day late.						
	-	count already submitted to the Copyright Offce, ounting period, and ID number as given in the	original					
OwnerAddress								
First community served Accounting period								
ID number								
Privacy Act Notice: Section 111 of title 1	7 of the United States Code authorizes the C	Copyright Offce to collect the personally identifying informa	tion (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 filing, a determination that would be made by a court of law.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

The Minimum 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, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

DSE SCHEDULE. PAGE 11.

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

Determine whether any of the stations you carried were partially 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 DSEs0.701% of gross receiptsThe fifth and each additional DSE0.330% 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.

 Identify the communities/areas represented by each subscriber group.
 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

		Distant Stations Carried		Identification of	of Subscriber	Groups		
In most cases	under current FCC	STATION	DSE	CITY	OUTSIDE LC		GRO	SS RECEIPTS
rules, all of F	airvale would be within	A (independent)	1.0		SERVICE AF	REA OF	FROM S	UBSCRIBERS
	e area of both stations	B (independent)	1.0	Santa Rosa	Stations A, B	, C, D ,E		\$310,000.00
A and C and al	I of Rapid City and Bo-	C (part-time)	0.083	Rapid City	Stations A an	nd C		100,000.00
dega Bay wou	ld be within the local	D (part-time)	0.139	Bodega Bay	Stations A an	nd C		70,000.00
service areas of	of stations B, D, and E.	E (network)	0.25	Fairvale	Stations B, D	, and E		120,000.00
		TOTAL DSEs	2.472		TOTAL GRO	SS RECEIPTS		\$600,000.00
	1 / \	Minimum Fee Total Gross	Receipts		\$600,000.00			
Santa Rosa	Stations A and C				x .01064			
	35 mile zone				\$6,384.00			
		First Subscriber Group	Second Subscriber Group			Third Subscriber Group		
	· · ′	(Santa Rosa)		(Rapid City and	Bodega Bay)		(Fairvale)	
	Fairvale							
	Tairvaic	Gross receipts	\$310,000.00	Gross receipts		\$170,000.00	Gross receipts	\$120,000.00
Rapid City		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
	Bodega	\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .010	64 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
- +	Boulega Bay	\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .007	01 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
<i>i</i> +		Base rate fee	\$6,497.20	Base rate fee	-	\$1,907.71	Base rate fee	\$1,604.03
Station	N B D							
l station		Total Base Rate Fee: \$6,4						
35 mil	e zone	In this example, the cable	system would ent	er \$10,008.94 in	space L, block	3, line 1 (page	7)	

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	STEM ID#				
1	Heart of Iowa Communic	cations Coop	perative			62045				
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line		0.00							
2	Instructions: In the column headed "Call S	Sign": list the ca	Il signs of all distant stations	identified by t	the letter "O" in column 5					
Computation of DSEs for	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- mercial educational station, give the DSE as ".25."									
Category "O"	CATEGORY "O" STATIONS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Add rows as necessary. Remember to copy all formula into new rows.										

	L	Leeners and the second s	h

ACCOUNTING PERIOD	. 2017/2						DSE SCHED	ULE. PAGE 12.
Name		OWNER OF CABLE SYSTEM:	Cooperative					62045
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column : figure should Column : be carried ou Column : give the type Column :	ist the call sign of all dist 2: For each station, give correspond with the info 3: For each station, give 4: Divide the figure in co t at least to the third dec 5: For each independent -value as ".25." 6: Multiply the figure in c point. This is the station	the number of hours prmation given in spa the total number of h lumn 2 by the figure i imal point. This is the station, give the "typ olumn 4 by the figure	your cable system ce J. Calculate on lours that the stati n column 3, and g e "basis of carriage e-value" as "1.0." in column 5, and formation on round	n carried the sta ly one DSE for a on broadcast ov ive the result in a value" for the s For each netwo give the result i ding, see page (ver the air during the acce each station. ver the air during the decimals in column station. vrk or noncommercia n column 6. Round (viii) of the general i	e accounting period. 4. This figure must al educational station, to no less than the nstructions in the paper	
	1. CALL SIGN	2. NUMBI OF HO CARRI SYSTE	URS O ED BY S	UMBER F HOURS TATION N AIR	4. BASIS OF CARRIAG VALUE		YPE 6. DS ALUE	SE
			÷	=		x	=	
			÷	=		x	=	
			÷	=		x		
			÷	=		x	=	
			÷	=		x	=	
			÷	=			=	
			÷	=			=	
			÷	=		X	=	
4 Computation of DSEs for Substitute- Basis Stations	Was carried tions in efficement Broadcast space I). Column 2: at your option. Column 3: Column 4:	ve the call sign of each s d by your system in subs ect on October 19, 1976 one or more live, nonnets For each station give th This figure should corre Enter the number of day Divide the figure in colu This is the station's DSE	stitution for a program (as shown by the let work programs during e number of live, non espond with the infor ys in the calendar yea mn 2 by the figure in E (For more informati	n that your system ter "P" in column 7 that optional carri- network programs mation in space I. ar: 365, except in a column 3, and giv on on rounding, se	was permitted i y of space I); an age (as shown by a carried in subs a leap year. e the result in co are page (viii) of	to delete under FCC d v the word "Yes" in co stitution for program olumn 4. Round to r the general instruct	Crules and regular- lumn 2 of s that were deleted no less than the third ions in the paper SA3 fo	prm).
		SI	UBSTITUTE-BAS	SIS STATIONS	S: COMPUTA	ATION OF DSE	3	
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAI	3. NUMBER OF DAYS MS IN YEAR	4. DSE
			÷	=			÷	=
			÷	=			÷	=
			÷	=			÷	=
			÷	=			÷	=
			÷ •	=			÷	-
	Add the DSEs	s OF SUBSTITUTE-BAS of each station. um here and in line 3 of		e,			0.00	-
5 Total Number	number of DSE	ER OF DSEs: Give the arts applicable to your system of DSEs from part 2 •		s in parts 2, 3, and	4 of this schedul	e and add them to pr ▶	0.00	
of DSEs	2. Number of	of DSEs from part 3 ●				▶	0.00	
	3. Number o	of DSEs from part 4 ●				▶	0.00]
	TOTAL NUMBE	ER OF DSEs					>	0.00

DSE SCHEDULE. P	AGE 13.							ACCOUNTIN	G PERIOD: 2017/2
LEGAL NAME OF C							S	YSTEM ID#	
Heart of Iowa	Communicatio	ons Coope	rative					62045	Name
schedule.	"Yes," leave the re	mainder of p		of the DSE sched	lule blank and	complete part	8, (page 16) of th	e	6
 If your answer if 	"No," complete blo	cks B and C		ELEVISION M					Computation of
ls the cable system	m located wholly o	utside of all n				tion 76 5 of E		ations in	3.75 Fee
effect on June 24,		schedule—D							
		BLO	CK B: CARR	IAGE OF PERI	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	of distant sta and regulation of DSE Schein	ations listed in point of the prior to Jun dule. (Note: The	oart 2, 3, and 4 of t e 25, 1981. For fur e letter M below re	this schedule t ther explanation	that your syste	d stations, see the	2	
Column 2: BASIS OF PERMITTED CARRIAGE	BASIS OF(Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)PERMITTEDA Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to								
Column 3:		e stations ide	ntified by the le	parts 2, 3, and 4 o tter "F" in column 2			orksheet on page 1	l4 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	
								0.00	
		E		MPUTATION OF	- 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this s	schedule			#REI	F!	
Line 2: Enter the	sum of permitte	d DSEs fron	n block B abo	ve			#REI	F!	
	line 2 from line 1 eave lines 4–7 bl					ate.	#REI	F!	
Line 4: Enter gro	oss receipts from	space K (pa	age 7)				#REI x 0.03		Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375 a	and enter su	m here				#REI	F!	permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line	3				× #REI	F!	carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 an	nd enter here	e and on line :	2, block 3, space	L (page 7)			#REF!	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#											
		Communicati		erat	tive					62045	Name
			BLOCK	A:		ION MARKETS		UED)	1		•
		2. PERMITTED	3. DSE			2. PERMITTED	3. DSE	1. CALL	2. PERMITTED	3. DSE	6
	SIGN	BASIS			SIGN	BASIS		SIGN	BASIS		
ļ				↓							Computation of 3.75 Fee
				.							3.75 Fee
				.							
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							DSE SCHEDULE. PAGE 14.				
Name	LEGAL NAME OF OWN						SYSTEM ID#				
	Heart of Iowa C	ommunications	Cooperative				62045				
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	 Instructions: You must complete this worksheet for those stations identifed 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 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 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 fle in the Licensing Division. 										
			E FOR STATIONS CAR								
	1. CALL	2. PRIOR	3. ACCOUNTING		BASIS OF	5. PRESENT	6. PERMITTED				
	SIGN	DSE	PERIOD		CARRIAGE	DSE	DSE				
	In struction st. Dis sk. A		I								
7	Instructions: Block A In block A:	a must be completed									
Computation	-	-	cks B and C, below.								
of the	If your answer is	"No," leave blocks E	and C blank and compl								
Syndicated Exclusivity			BLOCK A: MAJO	R TELE	VISION MARK	ET					
Surcharge	• Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981?										
Ū		blocks B and C .			No-Proceed to						
	BLOCK B: Ca	arriage of VHF/Grad	e B Contour Stations		BLOCK C: Computation of Exempt DSEs						
	Is any station listed in commercial VHF stati or in part, over the ca	on that places a gra	e primary stream of a de B contour, in whole	nity	Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159)						
		-	propriate permitted DSE		_	tation below with its app	ropriate permitted DSE				
		ind proceed to part 8.	F F F	x	-1	ind proceed to part 8.					
		I		╶║ᆮ							
	CALL SIGN	DSE C	ALL SIGN DSE		CALL SIGN	DSE CAL	L SIGN DSE				
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		т	DTAL DSEs 0.0	0		тот	AL DSEs 0.00				
				<u> </u>							

DSE SCHEDULE.	PAGE15.
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LEGAL NA	ME OF OWNER OF CABLE SYSTEM: SYSTEM 62 Heart of Iowa Communications Cooperative 62	M ID# 2045	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section	Enter the amount of gross receipts from space K (page 7) \$ 531,81	3 40	7
1 Section		5.40	•
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 defined by the FCC? Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 3a	X Yes—Complete part 9 of this schedule.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
Зb	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 faure on line C in section 2) and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	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 DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

ACCOUNTING PERIOD	: 2017/2	DSE SCHEDULE. PAGE 16.							
Name		IE OF OWNER OF CABLE SYSTEM: SYSTEM ID#							
	I	Heart of Iowa Communications Cooperative 62045							
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.							
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)							
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)							
Surcharge		C. Multiply line B by 3.000 and enter here.							
		D. Enter 0.00089 of gross receipts (the amount in section 1)							
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here							
		F. Multiply line D by line E and enter here							
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)							
		Syndicated Exclusivity Surcharge							
8 Computation	6 was • In blo	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.							
of	 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 								
Base Rate Fee	were lo	s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers incated within that station's local service area and others were located outside that area. For the definition of a station's "local 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. 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							

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Nomo
Heart	of Iowa Communications Cooperative 62045	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
4		8
	A. Enter 0.01064 of gross receipts	0
	(the amount in section 1)	
	B. Enter 0.00701 of gross receipts	Computation
	(the amount in section 1) > \$	of Base Rate Fee
	C. Multiply line B by 3.000 and enter here►	Dase Rale Fee
	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	
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals	
	stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line- Space G.	9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	
receipt	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of	Computation of
this exe	clusion, you must:	Base Rate Fee
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and Syndicated
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number o and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity
	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge for
NOTE:	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you	Partially
	Iso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below.	Distant
	er, if your cable system is wholly located outside all major television markets, complete block A only.	Stations, and for Partially
	Identify a Subscriber Group for Partially Distant Stations : For each community served, determine the local service area of each wholly distant and each partially distant station you	Permitted
-	to that community.	Stations
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne token, the station is distant to the subscriber.)	
subscr	: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only consistent actions are upperinded.	
	will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
subscr	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's ber groups.	
	n section:	
Give	fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the ibers in the group.	
• lf:		
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
, ,	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
• Add t	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions e paper SA3 form.	
page. DSEs f	bute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show ctual calculations on the form.	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS	
	Heart of Iowa Communications Cooperative	6204
	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 OWNEF Heart of Iowa Com						SY	STEM ID# 62045	Name
B				TE FEES FOR EACH				
	FIRST	SUBSCRIBER GROUI			SECOND	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<mark>.</mark>	_		Base Rate Fee
								and Syndicated
					··			Exclusivity
								Surcharge
					<mark>.</mark>			for
								Partially Distant
						-		Stations
					··			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secor	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secor	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROUI		FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark>.</mark>			
					•			
				•				
					··			
						-		
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the	e base rat	e fees for each subscri	ber group a	is shown in the boxes al	oove.			
Enter here and in block			5 6			\$	#REF!	

FORM SA3E. PAGE 19.

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER Heart of Iowa Com			•			SY	STEM ID# 62045	Name
В				TE FEES FOR EACH				
COMMUNITY/ AREA	FIRST	SUBSCRIBER GROU	P 0	COMMUNITY/ AREA 0				9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
	DOL	CALL SIGN	DOL	GALL SIGN	DOL		DOL	Base Rate Fee
		-						and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р					
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 G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
	-							
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
			iber group a	as shown in the boxes ab	oove.			
Enter here and in block	3, line 1, s	pace L (page 7)				\$	#REF!	

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Heart of Iowa Communications Cooperative	SYSTEM ID# 62045
	•	
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 Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none er Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the	arket any portion of your cable system is located in as defined Second 50 major television market hercial VHF Grade B contour stations listed in block A, part 9 of p for the VHF Grade B contour stations that were classified as hter zero. r of DSEs used to compute the surcharge.
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	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 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
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs 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	Line 1: Enter the VHF DSEs
		SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	e 7)