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			
3/1/2021	\$			
	ALLOCATION NUMBER			

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting Period	2020/2			
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate 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 a single statement of account and royalty fee payment covering the entire account in the country of the cable system's first filing. If not, enter the system's ID	ss of the cable syster on the last day of to	em. he accounting period should su	
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM			
	MCC Iowa, LLC (Ft. Madison, IA)			
				03235120202
				032351 2020/2
	ONE MEDIACOM WAY MEDIACOM PARK, NY 10918 INSTRUCTIONS: In line 1, give any business or trade names used to	identify the busine	ess and operation of the sys	stem unless these
С	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 with all communities.	y only the frst com	munity served below and re	elist on page 1b
Area Served	CITY OR TOWN	STATE		
First	Fort Madison	IA		
Community	Below is a sample for reporting communities if you report multiple ch	lannel line-ups in :	Space G.	
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alda	MD	A	1
	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 this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 1b. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 032351 MCC Iowa, LLC (Ft. Madison, IA) Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. STATE **CH LINE UP** SUB GRP# CITY OR TOWN Fort Madison IA AA First IA 3 Lee County AA Community **West Point** IA AA Mt Pleasant IA **AB** 4 2 **New London** IA **AB** Henry County (OUT of Mt Pleasant) IA AB 2 See instructions for Westwood IA AB 4 additional information on alphabetization. Add rows as necessary.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

MCC Iowa, LLC (Ft. Madison, IA)

SYSTEM ID# 032351

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1		BLOCK 2			
	NO. OF			NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:						
 Service to first set 	2,660	29.95-51.54				
 Service to additional set(s) 						
• FM radio (if separate rate)						
Motel, hotel						
Commercial	2	29.95-51.54				
Converter						
Residential						
Non-residential						
		•				

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable	PP	Motel, hotel		Family Cable	\$ 84.99
 Pay cable—add'l channel 	PP	Commercial			
Fire protection		• Pay cable			
 Burglar protection 		 Pay cable-add'l channel 			
Installation: Residential		Fire protection			
First set	\$ 99.99	Burglar protection			
 Additional set(s) 	15.00-49.00	Other services:			
• FM radio (if separate rate)		Reconnect	\$ 49.00		
Converter	\$ 10.50	Disconnect			
		Outlet relocation	15.00-49.00		
		 Move to new address 			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 032351 MCC Iowa, LLC (Ft. Madison, IA) PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if th∈ 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 othe 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. Identifi each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-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 channe 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 noncommercia 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 ex planation 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 you 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifec Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER STATION (If Distant) KHQA/KHQA (HD) CBS 7 Ν No Hannibal, MO KHQA-DT2/ KHQA-DT2 7.2 Ν No Hannibal, MO See instructions for additional information No KHQA-DT3 COMET 7.3 I Hannibal, MO on alphabetization. 12 Ε No Iowa City, IA KIIN/KIIN(HD) PBS Ε KIIN-DT2 PBS KIDS HD 12.2 No Iowa City, IA Ε No KIIN-DT3 PBS World 12.3 Iowa City, IA No KIIN-DT4 PBS Create 12.4 Ε Iowa City, IA Ν 33 No Kirksville, MO KTVO-ABC Ν 10 No WGEM/WGEM(HD) NB Qunicy, IL 10.2 Ī No WGEM-DT2/WGEM-DT2 Qunicy, IL Qunicy, IL WGEM-DT3/WGEM-DT 10.3 I No 32 No Quincy, IL WTJR TBN I WGEM-DT4 MeTV 10.4 I No Qunicy, IL

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
MCC Iowa, LLC (Ft. Madison, IA)	032351	Name
DDIMARY TRANSMITTERS, TELEVISION		

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 progran basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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. Identifi each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia 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 ex planation 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 you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	AB		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KCRG-ABC	9	N	Yes	0	CEDAR RAPIDS
KGCW/KGCW HD	41	I	No		BURLINGTON, IA
KIIN/KIIN(HD) PB	12	E	No		Iowa City, IA
KIIN-DT2 PBS KII	12.2	E	No		Iowa City, IA
KIIN-DT3 PBS Wo	12.3	Е	No		lowa City, IA
KIIN-DT4 PBS Cre	12.4	E	No		lowa City, IA
KLJB/KLJB(HD) I	18	I	No		DAVENPORT,IA
KTVO-ABC	33	N	No		Kirksville, MO
KWQC/KWQC(HD	36	N	No		Davenport, IA
KWQC-DT3 Cozi	36.3	N	No		Davenport, IA
KYOU-FOX	15	I	No		OTTUMWA, IA
WHBF/WHBF(HD	4	N	No		DAVENPORT,IA
WQAD/WQAD(HD	38	N	No		Moline, IL
WQAD-DT2 Anter	38.2	I	No		Moline, IL
WQAD-DT3 (HD)	38.3	I	No		Moline, IL
KWQC-DT4 Heroe	36.4	I	No		Davenport, IA
KGCW-DT2 This	41.2	I	No		BURLINGTON, IA
KGCW-DT3 Laff	41.3	I	No		BURLINGTON, IA

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ft. Madison, IA)	SYSTEM ID# 032351	Name
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 progran basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 ex planation 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 you 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 furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

	CHANNEL LINE-UP AB Cont								
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
KGCW-DT4 Boun	41.4	I	No		BURLINGTON, IA				
KLJB-DT2 MeTV	18.2	I	No		DAVENPORT,IA				
WHBF-DT3 Grit	4.3	I	No		DAVENPORT,IA				
WHBF-DT4 Escap	4.4	I	No		DAVENPORT,IA				
WQAD-DT4 Justic	38.4	I	No		Moline, IL				
KWQC-DT5 Start	36.3	N	No		Davenport, IA				
WHBF-DT2 Court	4.2	I	No		DAVENPORT,IA				
	-								

G

Primary Transmitters: Television

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN					SYSTEM ID#	Name		
MCC Iowa, LLC	•				032351			
PRIMARY TRANSMITT								
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:								
	n here in space	G—but do lis		he Special Staten	nent and Program Log)—if the			
basis. For further in the paper SA3 fo	nformation conc orm.	cerning substi	itute basis static	ons, see page (v)	citute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identify			
					ation. For example, report multi ch stream separately; for example			
Column 2: Give the its community of licens	se. For exampl	e, WRC is Ch	-		tion for broadcasting over-the-air ir s may be different from the channe			
educational station, by (for independent multi- For the meaning of the	e in each case / entering the locast), "E" (for rese terms, see	whether the setter "N" (for recommercial page (v) of the	network), "N-M" al educational), ne general instru	(for network multi or "E-M" (for nonc actions located in				
planation of local servi	ice area, see p ave entered "Y	age (v) of the 'es" in columr	general instruc n 4, you must co	tions located in the omplete column 5,	es". If not, enter "No". For an ex the paper SA3 form stating the basis on which you ntering "LAC" if your cable syster			
carried the distant state. For the retransmiss	tion on a part-ti sion of a distan	me basis bec t multicast str	ause of lack of eam that is not	activated channel subject to a royalt				
the cable system and tion "E" (exempt). For explanation of these the	a primary trans simulcasts, als rree categories	smitter or an a so enter "E". If s, see page (v	association repro you carried the y) of the general	esenting the prima channel on any o instructions locat	ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form			
	Canadian statio	ons, if any, giv	ve the name of t	the community wit	ty to which the station is licensed by the th which the station is identifec n channel line-up.			
		CHANN	EL LINE-UP	AC				
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
	NUMBER	STATION	(11111)	(If Distant)				
	-							

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 032351 MCC lowa, LLC (Ft. Madison, IA) 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. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** 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 AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FORM SAJE. PAGE 5.						ACCOUNTING	PERIOD: 2020/2
MCC lowa, LLC (Ft. Ma					S	032351	Name
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEI	NT AND PROGRAM LOC				
In General: In space I, ident substitute basis during the ac explanation of the programm form.	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorizations.	For a further	Substitute
1. SPECIAL STATEMENT	CONCER	NING SUBST	ITUTE CARRIAGE				Carriage:
During the accounting per				is, any nonn	etwork television prograr	m	Special Statement and
broadcast by a distant stat	tion?				Yes	XNo	Program Log
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is	"Yes," you m	nust complete the progra	m	
log in block 2. 2. LOG OF SUBSTITUTE	DDUCD V	MS					
In General: List each subst clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the progran Column 3: Give the call: Column 4: Give the broat the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 given Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	itute progra ce, please of every no distant stat gulations, of tion. Do no Lucy" or "NE n was broad sign of the se adcast station adian station thand day ye "5/7." es when the Example: a er "R" if the and regulation	am on a separa attach addition nnetwork televion and that your authorization at use general of BA Basketball: deast live, entestation broadca on's location (thous, if any, the when your system substitute program carrillisted program carrillisted program ons in effect du	al pages. rision program (substitute pour cable system substitute is. See page (vi) of the gercategories like "movies", o 76ers vs. Bulls." or "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the stem carried the substitute orgram was carried by your lied by a system from 6:01:	orogram) that ed for the pro neral instructi r "basketball" No." am. station is lic station is ide program. Us cable system 15 p.m. to 6: amming that d; enter the le	t, during the accounting gramming of another statements located in the paper. List specific program ensed by the FCC or, in entified). e numerals, with the month. List the times accurate 28:30 p.m. should be your system was require etter "P" if the listed pro	ation nth	
				10//10	N CUDOTITUTE		
S	UBSTITUT	E PROGRAM			EN SUBSTITUTE IAGE OCCURRED	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	6. TIMES FROM — TO	DELETION	
					<u> </u>		
					<u> </u>	"	
					<u> </u>		
					<u> </u>		
					<u> </u>	"	
					<u> </u>		
					_		
					_		
					_		

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 032351 MCC Iowa, LLC (Ft. Madison, IA) 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-J 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 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 **FROM** TO DATE FROM TO DATE

LEGA	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#				
МС	C Iowa, LLC (Ft. Madison, IA)		032351	Name			
Inst all a (as i page	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's secundentifed in space E) during the accounting period. For a further explanation of how to be (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	ondary	transmission service	K Gross Receipts			
IMP	DRTANT: 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.							
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b $\!c$ 3 below.	e enter	ed on line 1 of				
▶ If pa 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block ${\sf C}$ should be clow.	entered	on line 2 in block				
	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.		64 percent of the				
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064		\$ 838,314.83				
	Enter the result here. This is your minimum fee.	\$	8,919.67				
1	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 peri x Yes—Complete the DSE schedule. No—Leave block 3 below blank and column to the column television stations.	nn 4, yo	ou 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		\$ 792.90				
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		647.13				
	Line 3. Add lines 1 and 2 and enter here	\$	1,440.03				
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 Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7		\$ 8,919.67	Cable systems			
	(block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero.		0.00	additional deposits under			
	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 appropriate			
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	9,644.67	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 pa	ge (i) of the	244110114110001			

ACCOUNTING PERIOD: 2020/2
FORM SA3E, PAGE 8.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ft. Madison, IA)	YSTEM ID# 032351
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations.	
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations 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 Information	Name Kenneth J. Kohrs Telephone 845-443-2762	
	Address One Mediacom Way (Number, street, rural route, apartment, or suite number) Mediacom Park, NY 10918 (City, town, state, zip)	
	Email Copyrights@mediacomcc.com Fax (optional)	
O Certifcation	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.) • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or X (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified	
	in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.	
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	X	
	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 "f button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings. Typed or printed name: Kenneth J. Kohrs	:2"
	Typed of printed name. Nome	
	Title: Vice President, Financial Reporting (Title of official position held in corporation or partnership)	
	Date:	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the 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 telephon 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 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 land.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
MCC Iowa, LLC (Ft. Madison, IA) 032351	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	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 satellite dish owners?	Gross Receipts Exclusion
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address Mailing Address Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
Line 3 Multiply line 2 by the number of days late and enter the sum here	_
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	_
(interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please 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 late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	
Owner Address	
First community served	"
Accounting period ID number	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on 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 Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

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 broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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

· 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

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

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

- 5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

What to Do If You Need More Space on the DSE Schedule. There are no printed continuation sheets for the schedule. In most cases, the blanks provided should be large enough for the necessary information. If you need more space in a particular part, make a photocopy of the page in question (identifying it as a continuation sheet), enter the additional information on that copy, and attach it to the DSE schedule.

Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

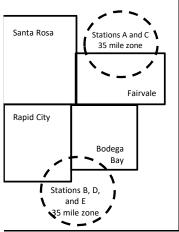
- · When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

The example below is intended to supplement the instructions for calculating only the base rate fee for partially distant stations. The cable system would also be subject to the Syndicated Exclusivity Surcharge for partially distant stations, if any portion is located within a major television market.

EXAMPLE:

COMPUTATION OF COPYRIGHT ROYALTY FEE FOR CABLE SYSTEM CARRYING PARTIALLY DISTANT STATIONS

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.



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

Minimum Fee Total Gross Receipts \$600,000.00 x .01064 \$6,384,00

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

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

ACCOUNTING PERIOD: 2020/2

	LEGAL NAME OF OWNER OF CAB	LE SYSTEM:			S	STEM ID#
1	MCC Iowa, LLC (Ft. Ma	dison, IA)				032351
	SUM OF DSEs OF CATEGO • Add the DSEs of each static Enter the sum here and in line	RY "O" STATION		91111	0.25	
2	Instructions: In the column headed "Call of space G (page 3).	_	_	-		
Computation of DSEs for	In the column headed "DSE mercial educational station, g		25."		ach network or noncom-	
Category "O"			CATEGORY "O" STATIC			T
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	KCRG-ABC	0.250				
Add rows as						
necessary. Remember to copy						
all formula into new						
rows.						
		<u></u>				

1	h	hh	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MCC Iowa, LLC (Ft. Madison, IA) 032351 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. Computation Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. of DSEs for 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 **Stations** be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Carried Part Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, Time Due to 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 Lack of Activated third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper Channel Capacity CATEGORY LAC STATIONS: COMPUTATION OF DSEs 3. NUMBER 5. TYPE 1 CALL 2. NUMBER 4 BASIS OF 6. DSE OF HOURS SIGN OF HOURS **CARRIAGE VALUE CARRIED BY STATION VALUE** SYSTEM ON AIR SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. 0.00 Instructions: 4 Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regular-tions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and Computation • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of of DSEs for Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted Substitute-**Basis Stations** at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form). SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs 1. CALL 2. NUMBER 3. NUMBER 4. DSE 1. CALL 2. NUMBER 3. NUMBER 4 DSF OF DAYS SIGN SIGN OF OF DAYS **PROGRAMS** IN YEAR **PROGRAMS** IN YEAR SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule, 0.00 TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total 5 number of DSEs applicable to your system. 0.25 1. Number of DSEs from part 2 ● **Total Number** of DSEs 2. Number of DSEs from part 3 ● 0.00 0.00 3. Number of DSEs from part 4 ● TOTAL NUMBER OF DSEs 0.25

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2020/2

	OWNER OF CABLES C (Ft. Madison						S	YSTEM ID# 032351	Name
n block A: If your answer if schedule.		mainder of pa	·	of the DSE sched	lule blank and	d complete part	8, (page 16) of the		6
ii your answer ii	"No," complete blo			TELEVISION MA	ARKFTS				Computation of
effect on June 24, Yes—Com	1981?	utside of all m	najor and smal	ler markets as defii	ned under se		CC rules and regul	ations in	3.75 Fee
		BLO	CK B: CARF	RIAGE OF PERI	MITTED DS	SEs			-
Column 1: CALL SIGN	under FCC rules	and regulatio e DSE Scheo	ns prior to Jun dule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re Act of 2010.)	ther explanat	tion of permitte	d stations, see the	•	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions fo E Carried pursua *F A station pre	les and reguled pursuant to on as defined al educationa I station (76.6 r DSE schedu ant to individu viously carrie HF station wi	ations cited be to the FCC mare in 76.5(kk) (70). I station [76.58] (see paragiule). I all waiver of FC d on a part-tim tithin grade-B c	e or substitute bas ontour, [76.59(d)(5	e in effect on .57, 76.59(b))(1), 76.63(a) 3(a) referring stitution of gr	June 24, 1981 , 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered sta	6.63(a) referring to		
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 o etter "F" in column 2			orksheet on page 1	4 of 3. DSE	
SIGN	BASIS		SIGN	BASIS		SIGN	BASIS		-
KCRG-ABC	A/D	0.25							
						•			
								0.25	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE				
ne 1: Enter the	total number of	ا DSEs from	part 5 of this	schedule			0		
ne 2: Enter the	sum of permitte	d DSEs fron	n block B abo	ve					
				of DSEs subject 7 of this schedule		rate.			
ne 4: Enter gro	oss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represe partially
ne 5: Multiply l	ine 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted carriage?
ine 6: Enter tota	al number of DSI	Es from line	3						If yes, see par 9 instructions
ine 7: Multiply l	ine 6 by line 5 ar	d enter here	e and on line	2, block 3, space	L (page 7)			0.00	

	F OWNER OF CABLE LLC (Ft. Madisor						S	7STEM ID# 032351	Name
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	IUED)			
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS		H	2. PERMITTED BASIS	3. DSE	6
0.0.1	2, 10.0		0.0	2, 10.0			2,10.0		Computation o
									3.73 Fee
<mark></mark>									
		•							

ACCOUNTING PERIOD: 2020/2

DSE SCHEDULE. PAGE 14.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MCC Iowa, LLC (Ft. Madison, IA) 032351 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Computating 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. the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute -Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 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. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE **PERIOD** CARRIAGE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? Yes—Complete blocks B and C . X No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN CALL SIGN DSE CALL SIGN DSE DSE DSE 0.00 0.00 **TOTAL DSEs** TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ft. Madison, IA)	SYSTEM ID# 032351	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	838,314.83	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 defined 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? Yes—Complete part 9 of this schedule. No—Complete the applicable section below.	S-	
	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 DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	DE	
	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		
	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 DS 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: MCC Iowa, LLC (Ft. Madison, IA)	SYSTEM ID# 032351
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 Syndicated		A. Enter 0.00300 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)	
		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	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of perchecked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B beck. 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," see page (v) of the general instructions.	elow
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	_	rour cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	1	Enter the amount of gross receipts from space K (page 7) ▶\$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.).	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1)	
		B. Enter 0.00701 of gross receipts (the amount in section 1)	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here -	
		D. Multiply line B by line C and enter here	
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
		Base Rate Fee	0.00

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2020/2

The state of the s		7,0000111111	
MCC lowa, LLC (Ft. Madison, IA)		SYSTEM ID# 032351	Name
Section If the figure in section 2 is more than 4.000	, compute your base rate fee here and leave section 3 blank.		
A. Enter 0.01064 of gross receipts (the amount in section 1)	> <u>\$</u>		8
B. Enter 0.00701 of gross receipts (the amount in section 1)	<u> </u>		Computation of Base Rate Fee
C. Multiply line B by 3.000 and enter	here > \$		
D. Enter 0.00330 of gross receipts (the amount in section 1)	<u> </u>		
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter	nere •		
F. Multiply line D by line E and enter	here > _		
G. Add lines A, C, and F. This is your Enter here and in block 3, line 1, s Base Rate Fee		0.00	
	rt television signals on a system-wide basis. Carriage of television bro	•	•
ups in Space G. In General: If any of the stations you carried w	ere partially distant, the statute allows you, in computing your base rat	te fee, to exclude	9
	tion's local service area, from your system's total gross receipts. To ta		Computation of Base Rate Fee
station or the same group of stations. Next: Tre DSEs and the portion of your system's gross re	iber groups, each group consisting entirely of subscribers that are dist eat each subscriber group as if it were a separate cable system. Deter eccipts attributable to that group, and calculate a separate base rate fe each subscriber group. That total is the base rate fee for your system	mine the number o ee for each group.	and
must also compute a Syndicated Exclusivity Su	cated within the top 100 television market and the station is not exemper cated within the top 100 television market and the station is not exemper cated to the station is not exemperate by the station is not exemple to the station is not exemple to the station is not exemple to the station is not exemple.		Partially Distant Stations, and
How to Identify a Subscriber Group for Part Step 1: For each community served, determine carried to that community.	ially Distant Stations e the local service area of each wholly distant and each partially distan	it station you	for Partially Permitted Stations
	ally distant station you carried, determine which of your subscribers we criber located outside the local service area of a station is distant to the oscriber.)		
subscriber group must consist entirely of subsc	groups according to the complement of stations to which they are dis ribers who are distant to exactly the same complement of stations. No en the distant stations it carried have local service areas that coincide.	ote that a cable	
Computing the base rate fee for each subscriber groups.	riber group: Block A contains separate sections, one for each of your	· system's	
In each section:			
Identify the communities/areas represented b Give the call sign for each of the stations in the subscribers in the group.	y each subscriber group. e subscriber group's complement—that is, each station that is distant	to all of the	
If: your system is located wholly outside all magand 4 of this schedule; or,	or and smaller television markets, give each station's DSE as you gav	e it in parts 2, 3,	
any portion of your system is located in a map part 6 of this schedule.	ajor or smaller televison market, give each station's DSE as you gave i	t in block B,	
·	u the total DSEs for the particular subscriber group.		
Calculate gross receipts for the subscriber groin the paper SA3 form.	oup. For further explanation of gross receipts see page (vii) of the gen	eral instructions	
page. In making this computation, use the DSI	group using the formula outline in block B of part 8 of this schedule on E and gross receipts figure applicable to the particular subscriber grou and total gross receipts from the subscribers in that group). You do no	p (that is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 032351 MCC Iowa, LLC (Ft. Madison, IA) 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.

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001111111111111111111111111111111111111		SUBSCRIBER GROU		001444		SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	Fort Ma	ndison, West Poin	τ	COMMUNITY/ AREA	Henry; N	iew London		Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALL CICIT	DOL	07 EE 01014	DOL	O/ IEE O'O'T	DOL	OF REE GIGIT	BOL	Base Rate I
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								Distant
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	•							
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 432	,858.94	Gross Receipts Second	d Group	\$	69,027.40	
		<u>, </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
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COMMUNITY/ AREA			DSE	COMMUNITY/ AREA			UP DSE	
	Lee Co	unty	T		Mt. Pleas	sant; Westwood		
	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
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	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
CALL SIGN	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
CALL SIGN	Lee Co	unty	T	CALL SIGN	Mt. Pleas	sant; Westwood		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN KCRG-ABC Total DSEs	DSE 0.25	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN KCRG-ABC	DSE 0.25	CALL SIGN	DSE	
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CALL SIGN	DSE DSE	CALL SIGN	DSE	CALL SIGN KCRG-ABC Total DSEs	DSE 0.25	CALL SIGN	DSE	
CALL SIGN CALL SIGN Fotal DSEs Gross Receipts Third C	DSE DSE	CALL SIGN	0.00 ,345.80	CALL SIGN KCRG-ABC Total DSEs Gross Receipts Fourth	DSE 0.25	CALL SIGN	0.25 298,082.69	
CALL SIGN CALL SIGN Total DSEs Gross Receipts Third C	DSE DSE	CALL SIGN	0.00 ,345.80	CALL SIGN KCRG-ABC Total DSEs Gross Receipts Fourth	DSE 0.25	CALL SIGN	0.25 298,082.69	
CALL SIGN CALL SIGN Fotal DSEs Gross Receipts Third Community of the co	DSE Group	s 38	0.00 ,345.80	CALL SIGN KCRG-ABC Total DSEs Gross Receipts Fourth	DSE 0.25 Octoor	CALL SIGN	0.25 298,082.69	

Di C)CK 4. 4		EBACEDA	TE EEEO EOD EAOU	SI IBSODI	BED CDOLID		
BLC		SUBSCRIBER GROU		ATE FEES FOR EACH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA	111		0	COMMUNITY/ AREA	23(111		0	9
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicat
								Exclusiv
								Surcharg
								for
								Partially Distant
								Stations
						-		Otations
			<u></u>			-		
otal DSEs			0.00	Total DSEs			0.00	
Daniel Circl Co		•		C D	d 0	•	0.00	
Gross Receipts First Grou	ıb	\$	0.00	Gross Receipts Second	a Group	\$	0.00	
Base Rate Fee First Group \$ 0.00								
ase Nate Fee First Group			0.00	Base Rate Fee Second	d Group	\$	0.00	
		\$ SUBSCRIBER GROU	-	Base Rate Fee Second			<u>'</u>	
SE		SUBSCRIBER GROU	UP			SUBSCRIBER GROU	JP	
SE			-	Base Rate Fee Second COMMUNITY/ AREA			<u>'</u>	
SE COMMUNITY/ AREA		SUBSCRIBER GRO	UP				JP	
SE COMMUNITY/ AREA	EVENTH		UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
SE COMMUNITY/ AREA	EVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	JP 0	
CALL SIGN	EVENTH	SUBSCRIBER GRO	DSE	COMMUNITY/ AREA CALL SIGN	EIGHTH	SUBSCRIBER GROU	DSE	
CALL SIGN CALL SIGN Total DSEs	DSE	CALL SIGN	DSE DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE O.00	
CALL SIGN CALL SIGN Fotal DSEs	DSE	SUBSCRIBER GRO	DSE	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	
SE COMMUNITY/ AREA	DSE	CALL SIGN	DSE DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE O.00	
CALL SIGN CALL SIGN Fotal DSEs	DSE	CALL SIGN	DSE DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE O.00	
CALL SIGN CALL SIGN Cotal DSEs Gross Receipts Third Grou	DSE	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Fourth	DSE	SUBSCRIBER GROU	DSE 0.00 0.00	

NAME OF OWNER OF CABLE SYSTEM: lowa, LLC (Ft. Madison, IA)	SYSTEM ID# 032351			
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GRO				
NINTH SUBSCRIBER GROUP TENTH SUBSCRIB 1UNITY/ AREA 0 COMMUNITY/ AREA	_			
IONITT/ AREA	COMMUNITY/ AREA 0			
L SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SI	GN DSE			
OSEs	0.00			
Receipts First Group \$ 0.00 Gross Receipts Second Group \$	0.00			
Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	0.00			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB	EER GROUP			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB O COMMUNITY/ AREA	ER GROUP 0			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB TUNITY/ AREA O COMMUNITY/ AREA L SIGN DSE CALL SIGN DSE CA	GN DSE			
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIB TUNITY/ AREA O COMMUNITY/ AREA L SIGN DSE CALL SIGN DSE CA	GN DSE			

LEGAL NAME OF OWNE						SY	STEM ID# 032351	Name
E	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRII	BER GROUP		
	FIRST	SUBSCRIBER GROU	IP		SECOND	SUBSCRIBER GROUP		9
COMMUNITY/ AREA	Fort Ma	Madison, West Point		COMMUNITY/ AREA	Henry; N	Henry; New London		
CALL SIGN	DSE	DSE CALL SIGN DSE		CALL SIGN	DSE	CALL SIGN	Computar of	
				KCRG-ABC	0.25			Base Rate
								and
								Syndicat
								Exclusiv
								Surchar
								for
		-						Partiall
								Distant
								Station
otal DSEs			0.00	Total DSEs			0.25	
Gross Receipts First G	roup	\$ 432	,858.94	Gross Receipts Secon	d Group	\$ 6	9,027.40	
							$\neg \neg $	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second Group \$ 647.13				
	THIRD	SUBSCRIBER GROU	IP	FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA	Lee Co	unty		COMMUNITY/ AREA	Mt. Pleas	sant; Westwood		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs	1		0.00	
Proce Receipts Third C	roup	. 20	,345.80	Gross Receipts Fourth	Group	\$ 20	8,082.69	
Gross Receipts Third G	лоир	ψ 30 <u>.</u>	,545.00	Gioss Receipts Fourth	Group	y 23	0,002.03	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				II				
Base Rate Fee: Add th								

Nonpermitted 3.75 Stations

						on, IA)	ER OF CABLE Ft. Madiso	MCC Iowa, LLC (F		
	-	BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	BLOCK A: (E		
_	SIXTH SUBSCRIBER GROUP					FIFTH SUBSCRIBER GROUP				
	COMMUNITY/ AREA 0				IUNITY/ AREA 0			COMMUNITY/ AREA		
Computa	CALL SIGN. DEF. TO CALL SIGN.					ALL SIGN DSE CALL SIGN DSE				
of Base Rate	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
and										
Syndica		H								
Exclusi		-				-				
Surcha						-				
for			•							
Partia										
Dista										
Statio						-				
			•							
		_				-				
_	0.00			Total DSEs	0.00			otal DSEs		
_	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	Group	Gross Receipts First G		
7										
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G		
		\$ SUBSCRIBER GROU		Base Rate Fee Secon		SUBSCRIBER GROU				
				Base Rate Fee Secon						
	IP .				JP					
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA		
	IP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	CALL SIGN		
	DSE DSE O.00	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE	SUBSCRIBER GROU	SEVENTH	CALL SIGN CALL SIGN Cotal DSEs		
	DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	SEVENTH	CALL SIGN CALL SIGN Total DSEs		
	DSE DSE O.00	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA		

Nonpermitted 3.75 Stations

ICC Iowa, LLC (Ft. Mad								
	A: COMPUTATION C		TE FEES FOR EACH	:				
MMUNITY/ AREA 0			TENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				0 9 Computation	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
							Base Rate	
							and Syndicat	
							Exclusiv	
							Surchar	
							for	
							Partiall Distan	
					-		Station	
					-			
otal DSEs		0.00	Total DSEs			0.00		
	_	0.00			\$	0.00		
ross Receipts First Group	\$	0.00	Gross Receipts Secon	ia Group				
ross Receipts First Group ase Rate Fee First Group	\$	0.00	Gross Receipts Secon	·	\$	0.00		
ase Rate Fee First Group		0.00		nd Group		0.00		
ase Rate Fee First Group	\$	0.00		nd Group	\$	0.00		
ase Rate Fee First Group ELEVEN	\$	0.00 DUP	Base Rate Fee Secon	nd Group	\$	0.00		
ase Rate Fee First Group ELEVEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP 0		
ase Rate Fee First Group ELEVEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP 0		
ase Rate Fee First Group ELEVEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP 0		
ase Rate Fee First Group ELEVEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP 0		
ase Rate Fee First Group ELEVEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP 0		
ase Rate Fee First Group ELEVEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP 0		
ase Rate Fee First Group ELEVEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP 0		
ase Rate Fee First Group ELEVEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP 0		
ase Rate Fee First Group ELEVEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP 0		
ase Rate Fee First Group ELEVEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP 0		
ase Rate Fee First Group ELEVEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP 0		
ELEVEN OMMUNITY/ AREA CALL SIGN DSE	\$ TH SUBSCRIBER GRO	0.00 DUP O DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN	TWELVTH	\$ SUBSCRIBER GRO	0.00 UP O DSE		
ELEVEN OMMUNITY/ AREA CALL SIGN DSE	\$ TH SUBSCRIBER GRO	0.00 DUP DSE 0.00	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN Total DSEs	TWELVTH DSE	SUBSCRIBER GROUND CALL SIGN	0.00 UP 0 DSE 0.00		
ELEVEN OMMUNITY/ AREA CALL SIGN DSE	\$ TH SUBSCRIBER GRO	0.00 DUP O DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN	TWELVTH DSE	\$ SUBSCRIBER GRO	0.00 UP O DSE		

ACCOUNTING PERIOD: 2020/2

FORM SA3E, PAGE 20.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ft. Madison, IA)	SYSTEM ID# 032351
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI	VITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and to Syndicated Exclusivity Surcharge. Indicate which major television mark by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for commer	cial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group f	or the VHF Grade B contour stations that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none enter	
for Partially Distant Stations	Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the first schedule. In making this computation, use gross receipts figure 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 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
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	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	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page	

ACCOUNTING PERIOD: 2020/2

FORM SA3E, PAGE 20.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ft. Madison, IA)	SYSTEM ID# 032351
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	VITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9 Computation	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television mar by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.	rcial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity	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
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none ent Step 3: In line 3, subtract line 2 from line 1. This is the total number of	
for Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the	•
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt 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
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	SEVENTH SUBSCRIBER GROUP	EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	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	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page	

	LOCK A	COMPLITATION	EDACEDA	TE EEE8 FOR FAOI	I CLIBCODI	DED CDOLID			
		SUBSCRIBER GRO		TE FEES FOR EACH		SUBSCRIBER GROU	ID		
COMMUNITY/ AREA	XILLINIII	SOBSCINDEN GIVE	0	ii –	OKILLINIII	SOBSCINIBLIN GINOC	_	9	
COMMUNITY AREA	JANUARI I I / ALCA				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of	
CALL GIGIT	DOL	CALLE GIGIT	BOL	O/ LEE OF OTT	DOL	CALL GIGIT	DOL	Base Rate	
								and	
			····			-		Syndicat	
								Exclusiv	
						H		Surcharg	
						H		for	
						H		Partially	
	<u>"</u> "					H		Distant	
						H		Stations	
						H		• • • • • • • • • • • • • • • • • • • •	
						H			
					<u> </u>				
					<u> </u>				
	, I		0.00	T-4-1 DO5			0.00		
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00		
Page Bate Foe First Cr	oun		0.00						
Base Rate Fee First Group \$ 0.00			I Dogo Data Ego Copor	od Croun					
			0.00	Base Rate Fee Secon	nd Group	\$	0.00		
FI		SUBSCRIBER GRO				SUBSCRIBER GROU	<u>,</u>		
		•	UP	:			<u>,</u>		
		•					JP		
COMMUNITY/ AREA		SUBSCRIBER GRO	UP	COMMUNITY/ AREA		SUBSCRIBER GROU	JP		
	FTEENTH	•	0 0	:	SIXTEENTH		JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
CALL SIGN	FTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTEENTH	SUBSCRIBER GROU	JP 0		
CALL SIGN CALL SIGN Fotal DSEs	DSE	CALL SIGN	DSE DSE O.000	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	JP 0 DSE		
CALL SIGN CALL SIGN Fotal DSEs	DSE	SUBSCRIBER GRO	DSE	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	JP 0		
COMMUNITY/ AREA	DSE	CALL SIGN	DSE DSE O.000	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	JP 0 DSE		
CALL SIGN CALL SIGN Total DSEs Gross Receipts Third G	DSE	CALL SIGN	DSE DSE O.000	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	JP 0 DSE		
CALL SIGN CALL SIGN Fotal DSEs	DSE	SUBSCRIBER GRO	0.00 0.00	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Fourth	DSE	SUBSCRIBER GROU	DSE 0.00 0.00 0.00		
OMMUNITY/ AREA CALL SIGN otal DSEs cross Receipts Third G	DSE	SUBSCRIBER GRO	0.00 0.00	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Fourth	DSE	SUBSCRIBER GROU	DSE 0.00 0.00 0.00		

LEGAL NAME OF OWN MCC lowa, LLC (I						S	YSTEM ID# 032351	Name
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCRI	BER GROUP		
SEVE	ENTEENTH	SUBSCRIBER GROU	JP	EIGHTEENTH SUBSCRIBER GROUP				9
COMMUNITY/ AREA	OMMUNITY/ AREA 0				COMMUNITY/ AREA 0			
CALL SIGN	ALL SIGN DSE CALL SIGN DSE			CALL SIGN	Computation of			
CALL SIGN	DOL	CALL SIGN	DSL	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
						_		Distant Stations
								Stations
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
N	INTEENTH	SUBSCRIBER GROU	JP	7	TWENTIETH	SUBSCRIBER GROU	JP	
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MCC lowa, LLC (F						S	YSTEM ID# 032351	Name
F	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
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SYSTEM ID# 032351					NAME OF OWNER OF CABLE IOWA, LLC (Ft. Madiso
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MCC lowa, LLC (F						S	YSTEM ID# 032351	Name
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Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
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CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	ONE HUNDRED THIS	RTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTIETH	SUBSCRIBER GROU	IP	
Total DSEs O.00 Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.			-			<u>"</u>	-		
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Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.						<u></u>			
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Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third G	Group	\$		Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.		1*			l cospio i dalla	-:- =	·		
	Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
	Base Rate Fee: Add th	e base rate	e fees for each subser	iber aroun	as shown in the boxes a	bove.			
				J. 5 p			\$		

BLOCK A							
			ATE FEES FOR EAC				
ONE HUNDRED FORTY-FIR:	ST SUBSCRIBER GRO		11		SUBSCRIBER GROUP	_	9
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	Computat
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs		0.00	Total DSEs			0.00	
Bross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Group	e e	0.00	Base Rate Fee Seco	and Group	\$	0.00	
ase rate ree riist ordap	\$	0.00	Dase Nate 1 cc 0000	ла огоар	Ψ	0.00	
ONE HUNDRED FORTY-THIF	RD SUBSCRIBER GRO	OUP	ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA		0	COMMUNITY/ AREA				
				١		0	
						0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE			CALL SIGN		
CALL SIGN DSE	CALL SIGN	DSE			CALL SIGN		
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CALL SIGN DSE	CALL SIGN	DSE			CALL SIGN		
CALL SIGN DSE	CALL SIGN	DSE O.00			CALL SIGN		
Total DSEs		0.00	CALL SIGN Total DSEs	DSE		DSE	
	CALL SIGN		CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		0.00	CALL SIGN Total DSEs	DSE		DSE	
Total DSEs		0.00	CALL SIGN Total DSEs	DSE		DSE	

ONE HUNDRED FORTY-FIFT	: COMPUTATION (1	
COMMUNITY/ AREA			TE FEES FOR EAC		BER GROUP SUBSCRIBER GROUP	,	
	H SUBSCRIBER GROU	0	COMMUNITY/ AREA		SUBSCRIBER GROUP	0	9
			COMMONT T/ AREA				Computat
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs		0.00	Total DSEs			0.00	
Bross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Group	e	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ase rate ree riist Group	\$	0.00	Buse Rule 1 ce occo	па Огоар	Ψ	0.00	
ONE HUNDRED FORTY-SEVENT	H SUBSCRIBER GROU	IP	ONE HUNDRED FO	ORTY-EIGHTH	SUBSCRIBER GROUP	,	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					=		
					_		
Fotal DSEs		0.00	Total DSEs			0.00	
				h Group		•	
otal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fourt	h Group	\$	0.00	
	\$			h Group	\$	•	
	\$			•	\$	•	

LEGAL NAME OF OWNER MCC lowa, LLC (Ft						S'	YSTEM ID# 032351	Name
				TE FEES FOR EACH				
ONE HUNDRED FORT	ΓY-NINTH	SUBSCRIBER GROU		ii e	FIFTIETH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-				_		and
								Syndicated Exclusivity
								Surcharge
		-						for
		-						Partially
								Distant
								Stations
					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GROU	P	ONE HUNDRED FIFT	Y-SECOND	SUBSCRIBER GROU	P	
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	
Base Rate Fee: Add the	e base rate	e fees for each subser	iber aroup	as shown in the boxes al	bove.			
Enter here and in block			9. 2mp	20.00 01	•	\$		

BI								
				TE FEES FOR EACH			ID.	
ONE HUNDRED FIFT	Y-I'HIRD	SUBSCRIBER GRO		ONE HUNDRED FIFT	Y-FOURTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALLE GIGIT	DOL	OF ILL STORY	BOL	O/ALL SIGIT	DOL	O/ IEE STOTY	BGE	Base Rate I
		-						and
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	nun							
			0 00	Rase Rate Fee Secon	d Groun	e	0.00	
		\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIF		•				SUBSCRIBER GROU		
ONE HUNDRED FIF		•						
ONE HUNDRED FIF		•	UP	ONE HUNDRED FI			JP	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
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ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FI	IFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	DSE	SUBSCRIBER GRO	DSE	ONE HUNDRED FI	DSE	SUBSCRIBER GROU	DSE	
ONE HUNDRED FIF	DSE	CALL SIGN	DSE DSE D.000	ONE HUNDRED FI COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE DSE	
ONE HUNDRED FIF	DSE COUP	CALL SIGN	DSE DSE D.000	ONE HUNDRED FI COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE DSE	
ONE HUNDRED FIF	DSE COUP	SUBSCRIBER GRO CALL SIGN \$	DSE	ONE HUNDRED FI COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Fourth	DSE	SUBSCRIBER GROU	DSE	
ONE HUNDRED FIF	TY-FIFTH DSE roup	SUBSCRIBER GRO CALL SIGN \$ \$	0.00 0.00	ONE HUNDRED FI COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Fourth	DSE Group	SUBSCRIBER GROU	DSE	

LEGAL NAME OF OWNE MCC lowa, LLC (F						S	YSTEM ID# 032351	Name
			BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
ONE HUNDRED FIFT	Y-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FI	FTY-EIGHTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.22 0.0.1	332	07.122 01011	332	07.22 57611	202	07.22 5.5.1	332	Base Rate Fee
		-						and
								Syndicated
								Exclusivity
								Surcharge
								for
						=		Partially
						-		Distant
								Stations
						_		
T-4-1 D0E-			0.00	T-4-1 DOE-			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED E	IETY-NINTH	SUBSCRIBER GROUP		ONE HUNDRI	ED SIXTIETH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add th	ne base rat e	e fees for each subsc	riber group	as shown in the boxes a	above.			
Enter here and in block			5 6			\$		

	t. Madiso	-					032351	Name
		COMPUTATION OF SUBSCRIBER GROUND		TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Secon		\$	0.00	
	FTEENTH	SUBSCRIBER GRO		li e		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
	iroup	\$	0.00	Total DSEs Gross Receipts Fourt	h Group	\$		
Gross Receipts Third G	·	\$ \$	0.00	Gross Receipts Fourt			0.00	
Total DSEs Gross Receipts Third G	·	\$				\$	0.00	

Al a	YSTEM ID# 032351	S						LEGAL NAME OF OWNE
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GROU	NTEENTH	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computa	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	BOL	O/ALL SIGIY	DOL	OF REE CICIT	BOL	CALLE GIGIT	DOL	O' LEE GIGIT
and						-	-	
Syndica								
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for						-		
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	0.00			Total DSEs	0.00			otal DSEs
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_	0.00	\$	d Group	Oloss Receipts Secol				
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0	0.00 0.00	\$ SUBSCRIBER GROU	d Group WENTIETH	Base Rate Fee Secon T COMMUNITY/ AREA	0	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
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0	0.00 0.00	\$ SUBSCRIBER GROU	d Group WENTIETH	Base Rate Fee Secon T COMMUNITY/ AREA	0	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
O	0.00 0.00 DSE	\$ SUBSCRIBER GROU	DSE	Total DSEs	DSE DSE	SUBSCRIBER GROU	DSE	OMMUNITY/ AREA CALL SIGN Total DSEs
O	0.00 0.00 DSE 0.00	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Secon TCOMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	NI COMMUNITY/ AREA

SYSTEM ID# 032351					on, IA)	R OF CABLE :. Madiso	MCC Iowa, LLC (Fi
	BER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		
0 Compu	CODOCINIDER GROC	-GLOOND	COMMUNITY/ AREA	0	SOBSONIBLY GROC	11-11101	COMMUNITY/ AREA
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Ra	_					-	
an Syndic							
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Surch	-				-	-	
fo						-	
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Dista Statio							
	-				-		
<u>'</u>			Total DSEs	0.00			Total DSEs
0.00							
0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
	\$ \$		Gross Receipts Secon Base Rate Fee Secon	0.00	\$		·
0.00	\$	d Group	Base Rate Fee Secon	0.00		oup	Base Rate Fee First Gr
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0.00 0.00 R GROUP	\$	d Group	Base Rate Fee Secon	0.00		oup	Base Rate Fee First Gr
0.00 0.00 R GROUP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr TWEN [*] COMMUNITY/ AREA
0.00 0.00 R GROUP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr TWEN [*] COMMUNITY/ AREA
0.00 0.00 R GROUP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 JP	SUBSCRIBER GROU	oup	Base Rate Fee First Gr TWEN [*] COMMUNITY/ AREA
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Form SA3E Long Form (Rev. 05-17)

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lase Rate Fee: Add th	e haco rate	a face for each subsc	riher group	as shown in the boxes	ahove			

Name	STEM ID# 032351	31				on, IA)	. Madiso	LEGAL NAME OF OWNER MCC lowa, LLC (Ft
		BER GROUP	SUBSCRII	TE FEES FOR EACH	BASE RA			
9		SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED THIRT		SUBSCRIBER GROUP	TY-THIRD	
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Name	032351	S						LEGAL NAME OF OWNER MCC Iowa, LLC (Ft
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA			
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		\$		Gross Receipts Secon Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00	SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Groone HUNDRED THIRT
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0	0.00	\$ SUBSCRIBER GROUP	Group Y-FOURTH	Base Rate Fee Second ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	Sase Rate Fee First Gro
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0	0.00	SUBSCRIBER GROUP CALL SIGN	Group Y-FOURTH DSE Group	Dase Rate Fee Second ONE HUNDRED FOR COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	SUBSCRIBER GROUP CALL SIGN	DSE Oup	ONE HUNDRED FOR COMMUNITY/ AREA

LEGAL NAME OF OWNE						S'	YSTEM ID# 032351	Name
			BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
	RTY-FIFTH	SUBSCRIBER GROUP		ii e	ORTY-SIXTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs	•		0.00	Total DSEs	•		0.00	
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Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
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ONE HUNDRED FORT	Y-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-EIGHTH	SUBSCRIBER GROUP		
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Base Rate Fee Third (Group		0.00	Base Rate Fee Fourth	n Group		0.00	
Jase Nate Fee Hill (Jioup	4	0.00	Dase Nate Fee Fourt	і Этоир	\$	0.00	
Base Rate Fee: Add tl			riber group	as shown in the boxes a	above.	\$		

	son, IA)					032351	Name
			TE FEES FOR EACH				
ONE HUNDRED FORTY-NINT COMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	ONE HUNDRE	D FIFTIETH	SUBSCRIBER GROI	UP 0	9
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sase Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIFTY-FIRS	T SUBSCRIBER GRO)UP	ONE HUNDRED FIFT	Y-SECOND	SUBSCRIBER GRO	IP	
OMMUNITY/ AREA			ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0				
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LEGAL NAME OF OWNER MCC lowa, LLC (Ft						<u> </u>	032351	Name
				TE FEES FOR EACH			ID.	
ONE HUNDRED FIFT	Y-THIRD	SUBSCRIBER GROU	0	ONE HUNDRED FIFT	Y-FOURTH	SUBSCRIBER GROU	0	9
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	0.00 JP O DSE	SUBSCRIBER GROU	DSE	Dase Rate Fee Secon ONE HUNDREI COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED FIFT COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00 JP	SUBSCRIBER GROU	DSE	Dase Rate Fee Second ONE HUNDRE! COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA
	0.00 JP	SUBSCRIBER GROU	DSE	Dase Rate Fee Second ONE HUNDRE! COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	SUBSCRIBER GROU	DSE	ONE HUNDRED FIFT COMMUNITY/ AREA CALL SIGN Fotal DSEs

ACCOUNTING PERIOD: 2020/2

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID		
Name	MCC Iowa, LLC (Ft. Madison, IA)		
	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 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:		
9 Computation			
of	☐ First 50 major television market ☐ Second 50 major television market		
Base Rate Fee	INSTRUCTIONS:		
and Syndicated Exclusivity Surcharge	 Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. 		
for Partially Distant Stations	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	NINTH SUBSCRIBER GROUP TENTH 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE First Group		
	ELEVENTH SUBSCRIBER GROUP TWELVTH 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group\$ SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group\$		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)		

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

ACCOUNTING PERIOD: 2020/2

FORM SA3E, PAGE 20.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ft. Madison, IA)	SYSTEM ID# 032351	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9 Computation	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television marby section 76.5 of FCC rules in effect on June 24, 1981:	rket any portion of your cable system is located in as defined	
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	First 50 major television market ☐ Second 50 major television market NSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	THIRTEENTH SUBSCRIBER GROUP	FOURTEENTH SUBSCRIBER GROUP	
	INIKTEENTH SUBSCRIBER GROUP	FOURTEENTH SUBSCRIDER GROUP	
	Line 1: Enter the VHF DSEs	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 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	
	SURCHARGE First Group	SURCHARGE Second Group	
	FIFTEENTH SUBSCRIBER GROUP	SIXTEENTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	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 computation	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 computation	
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for a in the boxes above. Enter here and in block 4, line 2 of space L (page		

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