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					
8/16/2021	\$					
	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	2021/1								
B Owner	Instructions:  Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the business of the cable system.  If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.  Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	Midcontinent Communications								
				564820 5648 20	0211 021/1				
	PO Box 5040								
	Sioux Falls, SD 57117-5040								
	INSTRUCTIONS: In line 1, give any business or trade names used to	identify the busine	ass and apparation of the syr	tom unloss the	000				
С	names already appear in space B. In line 2, give the mailing address of								
System	1 IDENTIFICATION OF CABLE SYSTEM: Sioux Falls, SD								
	MAILING ADDRESS OF CABLE SYSTEM: PO Box 5040  (Number, street, rural route, apartment, or suite number) Sioux Falls, SD 57117-5040 (City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	elist on page 1	b				
Area	with all communities.		,	1 3					
Served	CITY OR TOWN	STATE							
First	Sioux Falls	SD							
Community	Below is a sample for reporting communities if you report multiple ch	annel line-ups in S	Space G.						
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRI	P#				
Sample	Alda	MD	Α	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: 2021/1** FORM SA3E. PAGE 1b. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 5648 Midcontinent Communications 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. CITY OR TOWN **CH LINE UP** SUB GRP# STATE Sioux Falls SD AA First SD Baltic AA Community **Baltic-outs** SD AA **Brandon-outs** SD AA 1 Renner SD AA 1 Shindler SD AA 1 See instructions for **Brandon** SD additional information AΑ on alphabetization. Crooks SD AA 2 2 **Crooks-outs** SD AA 2 **Harrisburg** SD AA Add rows as necessary. 2 Lennox SD AA 2 SD Tea AA SD AB 3 Madison SD Colton AC 4 SD Humboldt AC 4 SD AD

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I			

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 5648

### Ε

### Secondary Transmission Service: Subscribers and Rates

#### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

Midcontinent Communications

**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.

BL	OCK 1			BLC	OCK 2	< 2		
	NO. OF				NO. OF			
CATEGORY OF SERVICE	SUBSCRIBERS	RATE		CATEGORY OF SERVICE	SUBSCRIBERS	3	R	ATE
Residential:								
<ul> <li>Service to first set</li> </ul>	26,315	\$	22.95	High Def Converter	26,32	)	\$	3.00
<ul> <li>Service to additional set(s)</li> </ul>				Hospitals	97	5	\$	4.00
<ul> <li>FM radio (if separate rate)</li> </ul>				Nursing Homes	2,54	2	\$	5.00
Motel, hotel	999	\$	9.00	Business Accounts	1,42	7	\$	22.95
Commercial	5,657	\$	69.95					
Converter								
Residential	36,100	\$	3.00					
Non-residential								
		T						

# F

### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

BLOCK 1							BLOCK 2		
CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE		RATE		TE CATEGORY OF SERVICE		RATE
Continuing Services:			Installation: Non-residential						
• Pay cable	\$	16.00	Motel, hotel	\$	499.00		Digital 1	\$	10.00
<ul> <li>Pay cable—add'l channel</li> </ul>			Commercial	\$	499.00	ľ	Digital Variety	\$	3.50
Fire protection			• Pay cable			ľ	Digital Espanol	\$	4.00
<ul> <li>Burglar protection</li> </ul>			Pay cable-add'l channel			ľ	Digital Sports & Variety	\$	9.00
Installation: Residential			Fire protection				Cinemax	\$	16.00
<ul> <li>First set</li> </ul>	\$	25.00	Burglar protection			ľ	Showtime	\$	16.00
<ul> <li>Additional set(s)</li> </ul>	\$	25.00	Other services:			ľ	Starz! & Encore	\$	16.00
<ul> <li>FM radio (if separate rate)</li> </ul>			Reconnect	\$	75.00		TMC	\$	16.00
<ul> <li>Converter</li> </ul>			Disconnect						
			Outlet relocation	\$	25.00	ľ			
			<ul> <li>Move to new address</li> </ul>	\$	25.00	ľ			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 5648 **Midcontinent Communications** 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 € **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 subjec 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) STATION NUMBER (If Distant) KDLT-DT 46.1 Ν No SIOUX FALLS, SD (NBC) KDLT-DT2 46.2 No SIOUX FALLS, SD (FOX) ı See instructions for additional information **KELO-DT** Ν No 11 SIOUX FALLS, SD (CBS) on alphabetization. **KELO-DT2** 11.2 I-M No SIOUX FALLS, SD (MNT HD) N-M **KELO-DT3** 11.3 No SIOUX FALLS, SD(WEATHER) KSFY-DT 13 Ν No SIOUX FALLS, SD (ABC) KSFY-DT2 No SIOUX FALLS, SD (CW) 13.2 I-M KSFY-DT3 13.3 I-M No SIOUX FALLS, SD (ME TV) Ε KSMN-DT 15 Yes 0 WORTHINGTON, MN (PBS) **KWSD-DT** 36.1 I No SIOUX FALLS, SD KTTW-DT2 7.2 I-M No SIOUX FALLS, SD (THIS TV) **KUSD-DT** 34 Ε No **VERMILLION, SD (PBS) KUSD-DT2** 34.2 E-M No **VERMILLION, SD (PBS WORLD) KUSD-DT3** 34.3 E-M No VERMILLION, SD (PBS CREATE) KUSD-DT4 34.4 E-M No **VERMILLION, SD (PBS KIDS)** No **KDLT-DT3** 46.3 I-M No SIOUX FALLS, SD (ANTENNA) **KDLT-DT4** 46.4 I-M No SIOUX FALLS, SD (COZI TV)

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Midcontinent Communications

PRIMARY TRANSMITTERS: TELEVISION

SYSTEM ID#
Name
Name

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 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. Identificated 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.

		CHANN	EL LINE-UP	AB	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KDLT-DT	46.1	N	No		SIOUX FALLS, SD (NBC)
KDLT-DT2	46.2	I	No		SIOUX FALLS, SD (FOX)
KELO-DT	11	N	No		SIOUX FALLS, SD (CBS)
KELO-DT2	11.2	I-M	No		SIOUX FALLS, SD (MNT HD)
KELO-DT3	11.3	N-M	No		SIOUX FALLS, SD(WEATHER)
KSFY-DT	13	N	No		SIOUX FALLS, SD (ABC)
KSFY-DT2	13.2	I-M	No		SIOUX FALLS, SD (CW)
KSFY-DT3	13.3	I-M	No		SIOUX FALLS, SD (ME TV)
KSMN-DT	15	Е	Yes	0	WORTHINGTON, MN (PBS)
KWSD-DT	36.1	I	No		SIOUX FALLS, SD
KTTW-DT2	7.2	I-M	No		SIOUX FALLS, SD (THIS TV)
KUSD-DT	34	Е	Yes	0	VERMILLION, SD (PBS)
KUSD-DT2	34.2	E-M	Yes	0	VERMILLION, SD (PBS WORLD)
KUSD-DT3	34.3	E-M	Yes	0	VERMILLION, SD (PBS CREATE)
KUSD-DT4	34.4	E-M	Yes	0	VERMILLION, SD (PBS KIDS)
			No		
KDLT-DT3	46.3	I-M	No		SIOUX FALLS, SD (ANTENNA)
KDLT-DT4	46.4	I-M	No		SIOUX FALLS, SD (COZI TV)

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Midcontinent Communications

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. Identification 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.

		CHANN	EL LINE-UP	AC	
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
KDLT-DT	46.1	N	No		SIOUX FALLS, SD (NBC)
KDLT-DT2	46.2	I	No		SIOUX FALLS, SD (FOX)
KELO-DT	11	N	No		SIOUX FALLS, SD (CBS)
KELO-DT2	11.2	I-M	No		SIOUX FALLS, SD (MNT HD)
KELO-DT3	11.3	N-M	No		SIOUX FALLS, SD(WEATHER)
KSFY-DT	13	N	No		SIOUX FALLS, SD (ABC)
KSFY-DT2	13.2	I-M	No		SIOUX FALLS, SD (CW)
KSFY-DT3	13.3	I-M	No		SIOUX FALLS, SD (ME TV)
KWSD-DT	36.1	I	No		SIOUX FALLS, SD
KTTW-DT2	7.2	I-M	No		SIOUX FALLS, SD (THIS TV)
KUSD-DT	34	Е	No		VERMILLION, SD (PBS)
KUSD-DT2	34.2	E-M	No		VERMILLION, SD (PBS WORLD)
KUSD-DT3	34.3	E-M	No		VERMILLION, SD (PBS CREATE)
KUSD-DT4	34.4	E-M	No		VERMILLION, SD (PBS KIDS)
			No		
KDLT-DT3	46.3	I-M	No		SIOUX FALLS, SD (ANTENNA)
KDLT-DT4	46.4	I-M	No		SIOUX FALLS, SD (COZI TV)
KUSD-DT3 KUSD-DT4 KDLT-DT3	34.3 34.4 46.3	E-M E-M	No No No No		VERMILLION, SD (PBS CREATIVERMILLION, SD (PBS KIDS) SIOUX FALLS, SD (ANTENNA

G

Primary Transmitters: Television

DDIMADY TDANSMITTEDS: TELEVISION		
Midcontinent Communications	5648	Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
FORM SASE. PAGE 5.		

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	AD		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KDLT-DT	46.1	N	No		SIOUX FALLS, SD (NBC)
KDLT-DT2	46.2	I	No		SIOUX FALLS, SD (FOX)
KELO-DT	11	N	No		SIOUX FALLS, SD (CBS)
KELO-DT2	11.2	I-M	No		SIOUX FALLS, SD (MNT HD)
KELO-DT3	11.3	N-M	No		SIOUX FALLS, SD(WEATHER)
KSFY-DT	13	N	No		SIOUX FALLS, SD (ABC)
KSFY-DT2	13.2	I-M	No		SIOUX FALLS, SD (CW)
KSFY-DT3	13.3	I-M	No		SIOUX FALLS, SD (ME TV)
KSIN-DT	28	E	No		SIOUX CITY, IA (PBS)
KWSD-DT	36.1	I	No		SIOUX FALLS, SD
KTTW-DT2	7.2	I-M	No		SIOUX FALLS, SD (THIS TV)
KUSD-DT	34	E	No		VERMILLION, SD (PBS)
KUSD-DT2	34.2	E-M	No		VERMILLION, SD (PBS WORLD)
KUSD-DT3	34.3	E-M	No		VERMILLION, SD (PBS CREATE)
KUSD-DT4	34.4	E-M	No		VERMILLION, SD (PBS KIDS)
			No		
KDLT-DT3	46.3	I-M	No		SIOUX FALLS, SD (ANTENNA)
KDLT-DT4	46.4	I-M	No		SIOUX FALLS, SD (COZI TV)

G

**Primary** Transmitters: Television

ACCOUNTING PERIOD: 2021/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 5648 **Midcontinent Communications** 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

TORWIGHOE, TAGE 0.						Accounting	1 LINIOD: 2021/1		
LEGAL NAME OF OWNER OF Midcontinent Commun		EM:			S	YSTEM ID# <b>5648</b>	Name		
SUBSTITUTE CARRIAGE	E. SDECIA	I STATEME	NT AND BROCKAM LO	3					
In General: In space I, ident substitute basis during the avexplanation of the programm form.	ify every non	nnetwork televiseriod, under spe	sion program broadcast by a ecific present and former FC	a distant statio CC rules, regu	lations, or authorizations.	For a further	<b> </b> Substitute		
1. SPECIAL STATEMENT	CONCER	NING SHRST	TITLITE CAPPIAGE				Carriage:		
<ul> <li>During the accounting per</li> </ul>				is. anv nonn	etwork television progran	n	Special		
broadcast by a distant sta	-			··-, -··· <b>,</b> ·····		XNo	Statement and Program Log		
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program									
log in block 2.									
2. LOG OF SUBSTITUTE PROGRAMS  In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "novies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the call sign of the station broadcasting the substitute program.  Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).  Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m."  Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in									
effect on October 19, 1976.	•					Γ			
S	UBSTITUT	E PROGRAM	l		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>				
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ACCOUNTING PERIOD: 2021/1 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **Midcontinent Communications** 5648 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#			
Mid	continent Communications			5648	Name		
Inst all a (as i	COSS 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 secondentifed 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 t	transmis	sion service	<b>K</b> Gross Receipts		
IMP	ORTANT: You must complete a statement in space P concerning gross receipts.		<del></del>	f 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 be $k = 1$ 0 below.	e enter	ed on lin	e 1 of			
▶ If pa	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be $\epsilon$ low.	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			
1	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 perce	nt of the			
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064		\$	6,854,823.05			
	Enter the result here. This is your minimum fee.	\$		72,935.32			
	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 colum "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting perion in the column in t	nn 4, yo	ou must	check			
Block 3	Line 1. <b>BASE RATE FEE</b> : Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$	3,150.93			
	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			0.00			
	Line 3. Add lines 1 and 2 and enter here	\$		3,150.93			
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		\$	72,935.32	Cable systems		
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter			0.00	submitting additional		
	zero.  Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9  (Interest Worksheet)			0.00	deposits under Section 111(d)(7) should contact the Licensing		
	Line 4. FILING FEE		\$	725.00	additional fees. Division for the		
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$		73,660.32	appropriate form for submitting the additional fees.		
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (ageneral instructions located in the paper SA3 form for more information.)	See pa	ge (i) of	the			

ACCOUNTING PERIOD: 2021/1

		FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  Midcontinent Communications	SYSTEM ID# 5648
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast sto 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.	tations 17
	Enter the total number of activated channels     on which the cable system carried television broadcast stations     and nonbroadcast services	387
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
for Further Information	Name Wynne Haakenstad Telephone	952-844-2622
	Address 3600 Minnesota Drive, STE 700 (Number, street, rural route, apartment, or suite number)	
	Edina, MN 55435 (City, town, state, zip)	
	Email wynne.haakenstad@midco.com Fax (optional)	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regul	ations.)
Certifcation	• 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 identifed in line 1 of space B	3; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable s in line 1 of space B and that the owner is not a corporation or partnership; or	system as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own in line 1 of space B.	ner of the cable system
	<ul> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.</li> <li>[18 U.S.C., Section 1001(1986)]</li> </ul>	l herein
	X /s/ Wynne Haakenstad	
	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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus comp	
	Typed or printed name: Wynne Haakenstad	
	Title: Director of Programming (Title of official position held in corporation or partnership)	
	Date: August 13, 2021	

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 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 Offce's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of lav

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
Midcontinent Communications	5648	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 A lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable so service of providing secondary transmissions of primary broadcast transmitters, the system scribers and amounts collected from subscribers receiving secondary transmissions pursuance."	ystem for the basic m shall not include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general paper SA3 form.		Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for sec made by satellite carriers to satellite dish owners?	ondary transmissions	
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payr For an explanation of interest assessment, see page (viii) of the general instructions in the paper		Q
Line 1 Enter the amount of late payment or underpayment	x	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	xdaysx 0.00274	
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 <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For full contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	rther assistance please	
** 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 C please list below the owner, address, first community served, accounting period, and ID number 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 Offce 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 telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

### 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

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

1.064% of gross receipts

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:

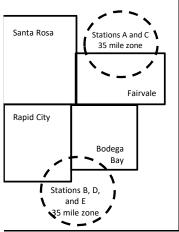
- · When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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)

DSE SCHEDULE. PAG	E 11. (CONTINUED)											
4	LEGAL NAME OF OWNER OF CABLE	E SYSTEM:			S	YSTEM ID#						
<u> </u>	Midcontinent Communic	cations				5648						
	SUM OF DSEs OF CATEGORY "O" STATIONS:  • Add the DSEs of each station.  Enter the sum here and in line 1 of part 5 of this schedule.  1.25											
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).											
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."											
Category "O"			CATEGORY "O" STATIC	DNS: DSEs		_						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
	KSMN-DT	0.250	KUSD-DT	0.250	KUSD-DT2	0.250						
	KUSD-DT3	0.250	KUSD-DT4	0.250								
Add rows as												
Add rows as												
necessary. Remember to copy												
all formula into new												
rows.												
10113.												
	111111111111111111111111111111111111111											
						100000000000000000000000000000000000000						

		l	
•	•	••••••••••	•••••

	LEGAL NAME OF 0	OWNER OF CABLE SYSTEM:						S	YSTEM ID#
Name	Midcontinen	t Communications							5648
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	CAPACITY st the call sign of all dista 2: For each station, give to correspond with the info 3: For each station, give to 4: Divide the figure in colu t at least to the third decir 5: For each independent so value as ".25." 6: Multiply the figure in co point. This is the station's	he number of hours mation given in spa he total number of Imn 2 by the figure mal point. This is the station, give the "ty Iumn 4 by the figur	s your cable syste ace J. Calculate of hours that the stat in column 3, and e "basis of carriag pe-value" as "1.0."	m carried the sta hly one DSE for e cion broadcast ov give the result in the value" for the s ' For each netwo	tion during the each station.  ver the air during decimals in colstation.  rk or noncomment of column 6. Ro	g the accou umn 4. This ercial educa und to no le	nting period. ifigure must ational station, ss than the	
Capacity		C	ATEGORY LA	C STATIONS:	COMPUTATI	ION OF DSE	s		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	JRS ( ED BY S M (	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	GE .	5. TYPE VALUE	6. DS	E
			÷		=	X		=	
			÷			X		<u>=</u>	
			÷			X			
			÷			X			
			÷ ÷		_	X		<u>_</u>	
			<u> </u>			x x			
			······			x		<u>-</u>	
Computation of DSEs for Substitute-Basis Stations	Instructions: Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4:	re the call sign of each station.  In here and in line 2 of p  The the call sign of each station of the call sign of each station give the call sign of the call s	art 5 of this schedulation listed in space itution for a program as shown by the leork programs during number of live, no spond with the information in the calendar years 2 by the figure in	e I (page 5, the Lo m that your systen tter "P" in column that optional carr nnetwork program mation in space I ar: 365, except in	g of Substitute P n was permitted to 7 of space I); an iage (as shown by is carried in subs a leap year.	to delete under d the word "Yes" stitution for prog	FCC rules a in column 2 or rams that we have to no less	of ere deleted than the third	m).
		SU	BSTITUTE-BA	SIS STATION	S: COMPUTA	ATION OF D	SEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMB OF PROG		3. NUMBER OF DAYS IN YEAR	4. DSE
		+		=			÷		=
		÷		=			÷		=
				=			÷		=
							÷		=
		÷				<mark></mark>	÷ ÷		=
	Add the DSEs	s OF SUBSTITUTE-BASI of each station. um here and in line 3 of p	IS STATIONS:				0.00		
5		ER OF DSEs: Give the am s applicable to your systen		es in parts 2, 3, and	4 of this schedule	e and add them	to provide th	e total	
Total Number	1. Number o	of DSEs from part 2 ●				<b>•</b>		1.25	
of DSEs		of DSEs from part 3 ●				`		0.00	
5. DoL3		of DSEs from part 4 ●				: ▶		0.00	
	TOTAL NUMBE	ER OF DSEs							1.25

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2021/1

LEGAL NAME OF O Midcontinent (							S	YSTEM ID# 5648	Name
Instructions: Bloc	ck A must be comp	leted.							
In block A: • If your answer if '	'Yes," leave the re	mainder of pa	rt 6 and part	7 of the DSE sched	ule blank and	l complete part	8, (page 16) of the	e	6
schedule. • If your answer if '	'No." complete blo	cks B and C h	nelow				, u o ,		
n your answer n	140, Complete bio			TELEVISION MA	ARKETS				Computation o
s the cable systen		utside of all m	ajor and smal	ler markets as defir	ned under sed	ction 76.5 of FC	CC rules and regul	ations in	3.75 Fee
		schedule—D0	NOT COMF	LETE THE REMAI	NDER OF PA	ART 6 AND 7.			
	lete blocks B and								
		BLOC	K B: CARF	RIAGE OF PERM	MITTED DS	BEs			
Column 1:	List the call signs			part 2, 3, and 4 of t			m was permitted t	o carry	
CALL SIGN	under FCC rules	and regulatior e DSE Sched	ns prior to Jur ule. (Note: Th	ie 25, 1981. For fur ie letter M below re	ther explanati	ion of permitted	d stations, see the	_	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru     A Stations carrie     76.61(b)(c)]     B Specialty statio     C Noncommerica     D Grandfathered instructions fo     E Carried pursua	les and regula ed pursuant to on as defined al educational I station (76.68 r DSE schedu ant to individua	ations cited be the FCC man in 76.5(kk) (7 station [76.59 5) (see parag le).	sis on which you ca elow pertain to those ket quota rules [76 6.59(d)(1), 76.61(e) 9(c), 76.61(d), 76.6: raph regarding subsection	e in effect on .57, 76.59(b), )(1), 76.63(a) 3(a) referring stitution of gra	June 24, 1981 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered sta	6.63(a) referring to	0	
Column 3:	M Retransmission	n of a distant each distant st e stations iden	multicast stre	ontour, [76.59(d)(5 am. parts 2, 3, and 4 of etter "F" in column 2	f the schedule	e.			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
KSMN-DT	C	0.25							
KUSD-DT KUSD-DT2	C M	0.25 0.25							
KUSD-DT3	M	0.25							
KUSD-DT4	M	0.25							
				·					
								1.25	
		В	LOCK C: CC	MPUTATION OF	3.75 FEE				
ine 1: Enter the	total number of	DSEs from p	art 5 of this	schedule			ı <del>r</del>		
ine 2: Enter the	sum of permitted	d DSEs from	block B abo	ve			10		
				of DSEs subject 7 of this schedule		ate.			
ine 4: Enter gro	ss receipts from	space K (pa	ge 7)						Do any of the DSEs represer
							x 0.03	5/5	partially permited/
ine 5: Multiply li	ne 4 by 0.0375 a	and enter sur	n here				x		partially nonpermitted
ine 6: Enter tota	al number of DSE	Es from line 3	3						carriage? If yes, see part 9 instructions.
ine 7: Multiply li	ne 6 by line 5 an	d enter here	and on line	2, block 3, space	L (page 7)			0.00	

EGAL NAME OF lidcontinent	Communication							STEM ID# 5648	Name
		BLOCK	A: TELEVIS	ION MARKETS	S (CONTIN	UED)			_
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation 6 3.75 Fee
								***************************************	
								***************************************	

ACCOUNTING PERIOD: 2021/1

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#									
Name	Midcontinent C	ommunica	ntions							5648
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	tating Column 1: List the call sign for each distant station identified by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)  A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections									981. ne entered
		PERMITT	ED DSE FOR STA	TIONS CARRIE	DΟ	N A PART-TIME AN	D SUBSTI	TUTE BASIS		
	1. CALL	2. PRI	OR 3. AC	COUNTING		4. BASIS OF	5. PF	RESENT	6. P	ERMITTED
	SIGN	DSE	P	ERIOD		CARRIAGE	1	OSE		DSE
<b>7</b> Computation of the		"Yes," comple	ete blocks B and C		part	8 of the DSE schedu	ıle.			
Syndicated			BLOC	K A: MAJOR	TEL	EVISION MARKI	ET			
Exclusivity										
Surcharge	Is any portion of the or	cable system v	vithin a top 100 maj	or television marl	ket a	s defned by section 76	6.5 of FCC	rules in effect Ju	ne 24, 1	1981?
	Yes—Complete	blocks B and	IC.			X No—Proceed to	part 8			
	-				ı					
	BLOCK B: Ca	arriage of VHI	F/Grade B Contour	Stations		BLOCK	C: Compu	itation of Exemp	ot DSEs	3
	la anu station lintad in	blask Dafin			١,,			<u>-</u>		
	Is any station listed in commercial VHF stati	-				/as any station listed ity served by the cabl		•		
	or in part, over the ca	-	o a grado D contoa	1, 111 1111010		former FCC rule 76.		mor to maron o	1, 1012	. (10101
	l'	•	th its appropriate per	mitted DSE		Yes—List each sta	,	with its appropriat	a narmit	tted DSE
				IIIIIIIIIII		X No—Enter zero ar			e periiii	iled DOL
	X No—Enter zero a	and proceed to	ран о.			X NO—Elitel Zelo al	ia proceed i	o part o.		
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIGN	, T	DSE
	3, 122 31311	202	5, 22 5,014			222 5.511	302	3, LE 3101		
								-		
								-		
			TOTAL DSEs	0.00				TOTAL DSE	Es	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: SYST Midcontinent Communications	EM ID# 5648	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	823.05	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the 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?      X Yes—Complete part 9 of this schedule.      No—Complete the applicable section below.  If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE		
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge.		
Section 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 DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM:  Midcontinent Communications  SYSTE	M ID#						
7	Section								
-	4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.							
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)							
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$							
Surcharge		C. Multiply line B by 3.000 and enter here							
		D. Enter 0.00089 of gross receipts (the amount in section 1)							
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.							
		F. Multiply line D by line E and enter here							
		G. Add lines A, C, and F. This is your surcharge.							
	Enter here and on line 2, block 4, space L (page 7)  Syndicated Exclusivity Surcharge.   \$\\$\\$\$								
	Instru	ctions:							
8	You m	sust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part							
		checked "Yes," use the total number of DSEs from part 5.  bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.							
Computation		ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.							
of	-	ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below							
Base Rate Fee	blank <b>What i</b>	is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers							
	were lo	ocated within that station's local service area and others were located outside that area. For the definition of a station's "local							
	service	e area," see page (v) of the general instructions.							
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS								
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?							
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.							
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE							
	Section 1 Enter the amount of gross receipts from space K (page 7)								
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.							
	2	(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 <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.							
		A. Enter 0.01064 of gross receipts  (the amount in section 1) ▶\$							
		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	<del></del>						
		and in block 3, line 1, space L (page 7)	0.00						
		Base Rate Fee	<u></u>						

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2021/1

DSE SCHEDULE. PAGE 17.	ACCOUNTING	3 PERIOD: 2021/1
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Midcontinent Communications	5648	
Section If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.		
4 A. Enter 0.01064 of gross receipts		8
(the amount in section 1)		
B. Enter 0.00701 of gross receipts		Computation
(the amount in section 1) \$		of Base Rate Fee
C. Multiply line B by 3.000 and enter here <b>\$</b>		
D. Enter 0.00330 of gross receipts		
(the amount in section 1) \$		
E. Subtract 4.000 from total DSEs		
(the figure in section 2) and enter here		
F. Multiply line D by line E and enter here <b>\$</b>		
G. Add lines A, C, and F. This is your base rate fee		
Enter here and in block 3, line 1, space L (page 7)		
Base Rate Fee	0.00	
MIDORIANITA Nice and have a second and secon	h	
<b>IMPORTANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reported m	U	•
ups in Space G.	•	9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base		Computation
receipts from subscribers located within the station's local service area, from your system's total gross receipts. T this exclusion, you must:	o take advantage of	of
and exclusion, you must.		Base Rate Fee and
<b>First:</b> Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. De		Syndicated
DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rai		Exclusivity
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your sys	stem.	Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not ex must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both blo However, if your cable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and each partially dis	stant station you	Stations
carried to that community.		
<b>Step 2:</b> For each wholly distant and each partially distant station you carried, determine which of your subscriber outside the station's local service area. A subscriber located outside the local service area of a station is distant to the same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations system will have only one subscriber group when the distant stations it carried have local service areas that coincidents.	. Note that a cable	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of subscriber groups.		
In each section:		
Identify the communities/areas represented by each subscriber group.		
• Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is dist subscribers in the group.	tant to all of the	
• If:		
1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you and 4 of this schedule; or,	gave it in parts 2, 3,	
<ol> <li>any portion of your system is located in a major or smaller televison market, give each station's DSE as you gapart 6 of this schedule.</li> </ol>	ave it in block B,	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the in the paper SA3 form.	general instructions	
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber of DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do your actual calculations on the form.	group (that is, the total	

# SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 5648 **Midcontinent Communications** 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.

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP  FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA Sioux Falls  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN  KSMN-DT 0.25  KSMN-DT 0.25	DSE
COMMUNITY/ AREA Sioux Falls COMMUNITY/ AREA Crooks  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
	DSE
KSMN-DT 0.25	
	·····
	·····
otal DSEs Total DSEs	0.25
Gross Receipts First Group <u>\$ 6,246,885.36</u> Gross Receipts Second Group <u>\$ 326</u>	5,952.02
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	869.69
THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP	
OMMUNITY/ AREA Madison COMMUNITY/ AREA Colton	
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
SMN-DT 0.25	
(USD-DT 0.25	
(USD-DT2 0.25	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(USD-DT3 0.25	,
USD-DT4 0.25	
	,
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	<b></b>
otal DSEsTotal DSEs	0.00
ross Receipts Third Group \$ 184,082.08 Gross Receipts Fourth Group \$ 41	,909.91
Base Rate Fee Third Group \$ 2,281.24 Base Rate Fee Fourth Group \$	0.00

Name	5648	SYS						LEGAL NAME OF OWNER  Midcontinent Com		
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (	В		
0		SUBSCRIBER GROUP	SIXTH		FIFTH SUBSCRIBER GROUP					
9 Computa	COMMUNITY/ AREA 0				COMMUNITY/ AREA Canton					
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate										
and		H								
Syndicat						-				
Exclusiv Surchar	·····									
for		-								
Partiall										
Distan						-				
Station										
		_								
	l									
	0.00			Total DSEs	0.00			otal DSEs		
	0.00	\$	l Group	Gross Receipts Second	,993.68	\$ 54,	oup	Gross Receipts First Gr		
	0.00	\$		Base Rate Fee Second	0.00	Base Rate Fee First Group \$ 0.00				
,		SUBSCRIBER GROUP	EIGHTH			SEVENTH SUBSCRIBER GROUP				
	0			COMMUNITY/ AREA	0	COMMUNITY/ AREA 0				
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	1					=				
		H								
	0.00			Total DSEs	0.00			Fotal DSEs		
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	oup			
	•	\$	Group			\$	roup	Fotal DSEs Gross Receipts Third Gr		

**Nonpermitted 3.75 Stations** 

LEGAL NAME OF OWNE Midcontinent Com			•	mittod 0.70 Otal		S	YSTEM ID# 5648	Name
В				TE FEES FOR EACH				
COMMUNITY/ AREA		SUBSCRIBER GROU	IP	COMMUNITY/ AREA		SUBSCRIBER GROU	IP	9
COMMUNITY AREA	SIOUX F	alls		COMMUNITY AREA	CIOURS			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
					<b>1</b>	H		
Total DSEs			0.00	Total DSEs				
Gross Receipts First G	roup	\$ 6,246	,885.36	Gross Receipts Second Group \$ 326,952.02				
Base Rate Fee First Group \$ 0.00				Base Rate Fee Secon		\$	0.00	
THIRD SUBSCRIBER GROUP				FOURTH SUBSCRIBER GROUP  COMMUNITY/ AREA Colton				
COMMUNITY/ AREA Madison				COMMUNITY/ AREA	Colton			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						_		
						-		
					<b> </b>			
					<b></b>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 184,082.08			Gross Receipts Fourth Group \$ 41,909.91					
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourth	Group	\$	0.00		
Base Rate Fee: Add th	e <b>base rat</b> e	e fees for each subscr pace L (page 7)	iber group a	as shown in the boxes al	oove.		0.00	

**Nonpermitted 3.75 Stations** 

		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH	LOUDCOD	IDED ODOLID		
		SUBSCRIBER GROU						
	canton		JP	001441111111111111111111111111111111111	SIXTH	SUBSCRIBER GROU		9
CALL SIGN	COMMUNITY/ AREA Canton			COMMUNITY/ AREA 0				Computat
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
	-					-		and
								Syndicate Exclusivi
	-							Surcharg
						-		for
	-							Partially
	-					-		Distant
								Stations
	-							
	-							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$ 54	,993.68	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SEVENTH SUBSCRIBER GROUP					EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	-							
	-							
	-					H		
Total DSEs			0.00	Total DSEs			0.00	
	Gross Receipts Third Group \$ 0.00			Gross Receipts Fourth	n Group	\$	0.00	
Gross Receipts Third G		•		· ·	•			
Gross Receipts Third G	r-							

ACCOUNTING PERIOD: 2021/1

FORM SA3E. PAGE 20.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#					
Name	Midcontinent Communications 5648						
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP					
9	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:						
Computation of Base Rate Fee	_ ,	☐ Second 50 major television market					
and Syndicated Exclusivity Surcharge for Partially Distant Stations	<ul> <li>INSTRUCTIONS:</li> <li>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.</li> <li>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.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>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 sho your actual calculations on this form.</li> </ul>						
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP					
	Line 4. Enterthe VIIIE DOE-	Line 4. Enter the MIE DOEs					
	Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt 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					
	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 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						