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

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

## SA3E Long Form

Return completed workbook by email to:

## 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	2019/2					
B Owner	rate title of the subsidiary, not that of the pare List any other name or names under which If there were different owners during the a single statement of account and royalty fee	the owner conducts the business of the accounting period, only the owner on the l	cable system ast day of the erioo	accounting period should s		062911
	LEGAL NAME OF OWNER/MAILING ADD	RESS OF CABLE SYSTEM				
	West Kentucky Rural Teleph	one Coop.				
					06291	120192
					062911	2019/2
	100 WK&T Technology Drive Mayfield, KY 42066					
<u>^</u>	INSTRUCTIONS: In line 1, give any busi	ness or trade names used to identify th	e business	and operation of the syst	em unless	these
С	names already appear in space B. In line	2, give the mailing address of the syst	em, if differe	ent from the address give	n in space	В.
System	1					
	MAILING ADDRESS OF CABLE SYSTEM:					
	2 (Number, street, rural route, apartment, or suite num)	per)				
	(City, town, state, zip code)					
D	Instructions: For complete space D instr	uctions, see page 1b. Identify only the	frst commu	nity served below and rel	list on page	; 1b
Area	with all communities.					
Served	CITY OR TOWN	STATE				
First Community	Kirksey	КҮ				
	Below is a sample for reporting commu CITY OR TOWN (SAMPLE)	, , ,	e-ups in Spa ATE	CH LINE UP	SUD	GRP#
	Alda		MD	A	306	1
Sample	Alliance		ND	В		2
	Gering	1	ND	В		3
form in order to pro numbers. By provi	e: Section 111 of title 17 of the United States Code autores your statement of account. PII is any personal in ding PII, you are agreeing to the routine use of it to est pared for the public. The effect of not providing the PII	formation that can be used to identify or trace an ablish and maintain a public record, which include	n individual, suc les appearing i	ch as name, address and teleph n the Offce's public indexes and	none d in	

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AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

01/20/20

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.

EGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
Nest Kentucky Rural Telephone Coop.			062911	
nstructions: List each separate community served by the cable system. A "com n FCC rules: "a separate and distinct community or municipal entity (including ur areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). of system identifcation hereafter known as the "first community." Please use it as	incorporated commun The frst community tha	ities within unincorp at you list will serve	porated	D Area Served
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobelow the identified city or town.	ile home parks should	be reported in pare	entheses	
f all communities receive the same complement of television broadcast stations ( all communities with the channel line-up "A" in the appropriate column below or le on a partially distant or partially permitted basis in the DSE Schedule, associate e lesignated by a number (based on your reporting from Part 9).	ave the column blank. ach relevant commun	If you report any s ity with a subscribe	tations r group,	
When reporting the carriage of television broadcast stations on a community-by- channel line-up designated by an alpha-letter(s) (based on your Space G reportir based on your reporting from Part 9 of the DSE Schedule) in the appropriate col	ig) and a subscriber gr			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
Kirksey	KY	В	5	First
Beulah	KY	Ā	1	Community
Brazil	KY	D	2	Community
Browns Grove	KI	A	3	
Buchanan	KY	C	6	
Churchton	KY	F	4	See instructions for
Clear Springs	KY	Α	3	additional informat
Coldwater	KY	В	5	on alphabetization.
Cottage Grove	KY	С	6	
Cuba	KY	Α	3	
Cunningham	KY	Α	7	
Dexter	KY	В	5	Add rows as necess
Dogwood	KY	Ā	3	
Dublin	KY		3	
		A	•••••••••••••	
Eaton	KY	D	2	
Fairdealing	KY	Α	12	
Fancy Farm	KY	Α	3	
Farmington Faxon	KY KY	A B	3 8	
Folsomdale	KY	Α	3	
Hardin	KY	Â	12	
Harris Grove	KY	B	8	
lazel	KI	B	13	
	KY	A	3	
Kirbyton	KY	A	1	
LOWES	KY	Α	3	
₋ynn Grove	KY	В	8	
_ynnville	KY	В	8	
Mason Hall	KY	E	9	
Nelber	KY	Α	10	
New Concord	KY	В	13	
Pryorsburg	KY	Α	3	
Puryear	KY	С	6	
Sedalia	KY	Ă	3	
Frimble	KI	F	J J	1
/iola	KY			1
		A		1
Nest Plains	KY	A	3	1
Nest Viola	KY	A	3	1
Ningo	KY	Α	3	
	KY	D	11	
forkville				
rorkville				

								/ SA3E. PAGE 2
Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:					S	YSTEM ID#
name	West Kentucky Rural Te	elephone Co	oop.					062911
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmission about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the nu- separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed category, but do not include disc Block 1: In the left-hand block systems most commonly provide that applies to your system. Note categories, that person or entity subscriber who pays extra for ca- first set" and would be counted of Block 2: If your cable system	SERVICE: SU pace E should on of television ay cable) in sp (June 30 or D b blocks in spa / transmission umber of billing ice at the rate harged for eace (Example: "\$2 ounts allowed in space E, th to their subsc where an in should be coun ble service to nce again und nas rate catego	JBSCRIBERS AND RA cover all categories of and radio broadcasts bace F, not here. All the ecember 31, as the ca ce E call for the number service. In general, yo gs in that category (the indicated—not the num th category of service. 20/mth"). Summarize a for advance payment. e form lists the categor ribers. Give the number dividual or organization net as a subscriber in additional sets would b ler "Service to additional ories for secondary trained and the secondary trained ories for secondary trained cover all category trained and the secondary trained ories for secondary trained cover all category of secondary trained and the secondary trained cover all category of secondary trained and the secondary trained cover all category of secondary trained cover all	secondar by your sy a facts you se may be er of subso u can com number o hber of set Include bo ny standar ries of seco er of subso n is receivi each appl e included al set(s)."	stem to subscri state must be to pribers to the ca pute the number f persons or org s receiving serventh the amount of rd rate variation ondary transmiser ing service that licable category I in the count un service that are	bers. Give those existi- ble system er of subsci janizations rice). of the charg s within a p ssion servic for each lis falls under . Example: der "Servic e different fi	information ing on the , broken ribers in charged ge and the particular rate ted category different a residential ce to the rom those	00231
	printed in block 1 (for example, the number of subscribers a							
	sufficient.			T		BL OC	K 0	
	BLC	DCK 1 NO. OF	-			BLOC	NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		CATE	EGORY OF SE	RVICE	SUBSCRIBERS	RATE
	Residential:						0.500	
	Service to first set		2,890 \$ 39.90 4.306 \$ 4.95	Expande	d Service		2,503	\$ 94.90
	<ul> <li>Service to additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>		4,306 \$ 4.95					
	Motel, hotel							
	Commercial		9 \$ 46.20					
	Converter							
	Residential							
	Non-residential							
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, ti service for a single fee. There ar furnished at cost or (2) services amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip	e (not subscrit hose services e two exceptio or facilities furr it in which it is rate column. e charged by t your cable sys separate charg	ber) information with re that are not offered in o ons: you do not need to nished to nonsubscribe usually billed. If any ra the cable system for ea stem furnished or offer ge was made or establi	spect to al combinatio give rate ers. Rate in ates are ch ach of the a ed during	on with any seco information con formation shou arged on a vari applicable servio the accounting	ondary tran cerning (1) ld include t able per-pr ces listed. period that	smission services ooth the rogram basis, were not	
		BLO					BLOCK 2	
	CATEGORY OF SERVICE Continuing Services:	RATE	CATEGORY OF SER Installation: Non-res	-	RATE	CATEGO	ORY OF SERVICE	RATE
	• Pay cable		• Motel, hotel	iuentiai		Variety T	Tier	\$ 6.95
	Pay cable—add'l channel		Commercial			HD Tier		\$ 14.95
	Fire protection		• Pay cable			Hispanic	: Tier	\$ 12.95
	•Burglar protection		• Pay cable-add'l ch	nannel		HBO		\$ 15.95
	Installation: Residential		<ul> <li>Fire protection</li> </ul>			Showtim		\$ 15.95
	• First set		• Burglar protection			Starz/En	core	\$ 15.95
	Additional set(s)		Other services:					
	<ul> <li>FM radio (if separate rate)</li> <li>Converter</li> </ul>		Reconnect     Disconnect					
			Outlet relocation					
			Move to new addr	ess				

LEGAL NAME OF OV	WNER OF CABLE SY	/STEM:			SYSTEM ID#	Namo
West Kentuck	ky Rural Tele	phone Coo	р.		062911	Name
PRIMARY TRANSMIT	TERS: TELEVISIO	DN				
carried by your cable	e system during t	he accounting	period, except	(1) stations carri	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G
76.59(d)(2) and (4),	76.61(e)(2) and (	4), or 76.63 (r	eferring to 76.6		and (2) certain stations carried on a	Primary
substitute program b Substitute Basis basis under specifc l	Stations: With	respect to any	distant stations	s carried by your	cable system on a substitute program	Transmitters: Television
	on here in space	G—but do lis		ne Special Statem	ent and Program Log)—if the	
	information conc				itute basis and also on some other of the general instructions located	
		-			es such as HBO, ESPN, etc. Identify	
			0	•	ation. For example, report multi- h stream separately; for example	
Column 2: Give t ts community of lice	ense. For example	e, WRC is Ch			tion for broadcasting over-the-air in may be different from the channel	
on which your cable Column 3: Indica			ation is a netwo	ork station. an ind	ependent station, or a noncommercial	
				,	cast), "I" (for independent), "I-M"	
· ·	<i>,.</i> (		,.	•	ommercial educational multicast).	
or the meaning of t Column 4: If the					es". If not, enter "No". For an ex-	
planation of local ser						
•			•	•	stating the basis on which your itering "LAC" if your cable system	
carried the distant st		•	0.		<b>o i i</b>	
					y payment because it is the subject	
-					rstem or an association representing ary transmitter, enter the designa-	
tion "E" (exempt). Fo	or simulcasts, also	o enter "E". If	you carried the	channel on any c	ther basis, enter "O." For a further	
					ed in the paper SA3 form. y to which the station is licensed by the	
					h which the station is identifed.	
Note: If you are utiliz				•		
		CHANN	EL LINE-UP	Α		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
KBSI-DT	22	I-M			Cape Girardeau. MO	
KBSI-HD	22.1	I			Cape Girardeau. MO	See instructions for
KFVS-DT	12	N-M			Cape Girardeau. MO	additional information
KFVS-HD	12.1	N			Cape Girardeau. MO	on alphabetization.
WDKA	49	I			Paducah, KY	
WKMU	41	E			Murray, KY	
WKPD	41	E			Paducah, KY	
WPSD-DT	32	N-M			Paducah, KY	
WPSD-HD	32.1	N			Paducah, KY	
WQWQ-LP	9	 			Paducah, KY	
WSIL-DT	34	N-M			Harrisburg, IL	
WSIL-HD	34.1	N			Harrisburg, IL	

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

062911

FORM SA3E. PAGE 3.	
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West Kentucky Rural Telephone Coop.

#### PRIMARY TRANSMITTERS: TELEVISION

LEGAL NAME OF OWNER OF CABLE SYSTEM

**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 other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

				_	
		CHANN	EL LINE-UP	В	
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
KBSI-DT	22	I-M			Cape Girardeau. MO
KBSI-HD	22.1	I			Cape Girardeau. MO
KFVS-DT	12	N-M			Cape Girardeau. MO
KFVS-HD	12.1	N			Cape Girardeau. MO
WDKA	49	I			Paducah, KY
WKMU	41	Е			Murray, KY
WKPD	41	E	Yes	О	Paducah, KY
WKRN-DT	27	N-M			Nashville, TN
WKRN-HD	27.1	N			Nashville, TN
WQWQ-LP	9	I			Paducah, KY
WSIL-DT	34	N-M			Harrisburg, IL
WSIL-HD	34.1	N			Harrisburg, IL
WSMV-DT	10	N-M			Nashville, TN
WSMV-HD	10.1	N			Nashville, TN
WTVF-DT	25	N-M			Nashville, TN
WTVF-HD	25.1	N			Nashville, TN
WPSD-DT	32	N-M			Paducah, KY
WPSD-HD	32.1	N			Paducah, KY

**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 identifed. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

062911

West Kentucky Rural Telephone Coop.

#### PRIMARY TRANSMITTERS: TELEVISION

LEGAL NAME OF OWNER OF CABLE SYSTEM

**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 other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

		CHANN	EL LINE-UP	С	
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
WKRN-DT	27	N-M			Nashville, TN
WKRN-HD	27.1	N			Nashville, TN
WNAB-DT	23	I			Nashville, TN
WNPT-DT	8	E	Yes	0	Nashville, TN
WPSD-DT	32	N-M			Paducah, KY
WPSD-HD	32.1	N			Paducah, KY
WSMV-DT	10	N-M			Nashville, TN
WSMV-HD	10.1	N			Nashville, TN
WTVF-DT	25	N-M			Nashville, TN
WTVF-HD	25.1	N			Nashville, TN
WUPX-DT	21	I	Yes	0	Morehead, KY
WZTV-DT	15	I-M			Nashville, TN
WZTV-HD	15.1	I			Nashville, TN

**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 identifed. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as <b>Substitute Basis Station</b> basis under specifc FCC rule • Do not list the station here station was carried only of • List the station here, and a basis. For further informa in the paper SA3 form. <b>Column 1:</b> List each stat each multicast stream assoc cast stream as "WETA-2". S WETA-simulcast). <b>Column 2:</b> Give the char its community of license. For on which your cable system <b>Column 3:</b> Indicate in ea educational station, by enter (for independent multicast), For the meaning of these ter <b>Column 5:</b> If you have er cable system carried the dis carried the distant station on For the retransmission of of a written agreement enter the cable system and a prim tion "E" (exempt). For simula explanation of these three ca <b>Column 6:</b> Give the local FCC. For Mexican or Canad <b>Note:</b> If you are utilizing mul- 1. CALL SIGN	TELEVISIO entify ever enduring t in effect o e)(2) and o as explained ons: With ules, regula e in space on a subs also in spa ation cond ation's call boiated wit Simulcast annel num or example n carried th each case of ering the le the "E" (for n erms, see n is outside rea, see p entered "Y" istant statii of a distan- ered into o mary trans-	DN y television st he accounting n June 24, 19 4), or 76.63 (i d in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta cerning substi sign. Do not I h a station ac streams must ber the FCC I e, WRC is Ch he station. whether the si etter "N" (for n oncommercia page (v) of the the local sen age (v) of the es" in column on during the me basis beca: multicast stream n or before Ju mitter or an a o enter "E". If , see page (v)	tation (including g period, except 81, permitting th referring to 76.6 paragraph. y distant stations norizations: st it in space I (th ation was carried itute basis station report origination coording to its ov t be reported in or has assigned to has assigned to has assigned to has assigned to has annel 4 in Wash tation is a netwo hetwork), "N-M" ( al educational), co general instruct of 4, you must cor accounting period ause of lack of a eam that is not so une 30, 2009, be association repre- you carried the portice areal instruct of the general	(1) stations carri the carriage of cer 1(e)(2) and (4))]; is carried by your the Special Statem d both on a subst ms, see page (v) of the program service er-the-air designs column 1 (list eac column 1 (list eac the television sta- nington, D.C. This ork station, an ind for network multi- or "E-M" (for none ctions located in the mplete column 5, od. Indicate by er totivated channel subject to a royalt etween a cable sy esenting the prima channel on any co	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your itering "LAC" if your cable system	G Primary Transmitter Television
In General: In space G, ider carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e) substitute program basis, as Substitute Basis Station basis under specifc FCC rule • Do not list the station here station was carried only co- • List the station here, and a basis. For further informa in the paper SA3 form. Column 1: List each stat each multicast stream assoc cast stream as "WETA-2". S WETA-simulcast). Column 2: Give the char its community of license. For on which your cable system Column 3: Indicate in ea educational station, by enter (for independent multicast), For the meaning of these ter Column 4: If the station i planation of local service are column 5: If you have er cable system carried the dis carried the distant station on For the retransmission of of a written agreement enter the cable system and a prim tion "E" (exempt). For simulc explanation of these three cc Column 6: Give the local FCC. For Mexican or Canad Note: If you are utilizing mul 1. CALL SIGN	entify ever em during t in effect o e)(2) and ( as explained ons: With ules, regula e in space on a subs also in spa- ation cond ation's call bociated wit Simulcast annel num or example n carried th each case y ering the le o, "E" (for n erms, see n is outside rea, see p entered "Y istant statii on a part-ti of a distan- ered into o mary trans-	y television st he accounting n June 24, 19 4), or 76.63 (i ed in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta cerning substi sign. Do not i h a station ac streams must ber the FCC h e, WRC is Ch ne station. whether the si etter "N" (for n oncommercia page (v) of the the local sen age (v) of the ess" in column on during the me basis beca c multicast strea n or before Ju mitter or an a o enter "E". If , see page (v)	g period, except paragraph. y distant stations horizations: st it in space I (the ation was carried itute basis station report origination coording to its ov t be reported in or has assigned to has a network has a network	(1) stations carri the carriage of cer 1(e)(2) and (4))]; is carried by your the Special Statem d both on a subst ms, see page (v) of the program service er-the-air designs column 1 (list eac column 1 (list eac the television sta- nington, D.C. This ork station, an ind for network multi- or "E-M" (for none ctions located in the mplete column 5, od. Indicate by er totivated channel subject to a royalt etween a cable sy esenting the prima channel on any co	ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program nent and Program Log)—if the itute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- th stream separately; for example tion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial cast), "I" (for independent), "I-M" ommercial educational multicast). the paper SA3 form. es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your itering "LAC" if your cable system capacity. y payment because it is the subject visem or an association representing ary transmitter, enter the designa-	Primary Transmitter
carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as <b>Substitute Basis Station</b> basis under specifc FCC rule • Do not list the station here station was carried only c • List the station here, and a basis. For further informa in the paper SA3 form. <b>Column 1:</b> List each stat each multicast stream assoc cast stream as "WETA-2". S WETA-simulcast). <b>Column 2:</b> Give the char its community of license. For on which your cable system <b>Column 3:</b> Indicate in ea educational station, by enter (for independent multicast), For the meaning of these ter <b>Column 4:</b> If the station i planation of local service are <b>Column 5:</b> If you have er cable system carried the dis carried the distant station on For the retransmission of of a written agreement enter the cable system and a primi tion "E" (exempt). For simulc explanation of these three ca <b>Column 6:</b> Give the local FCC. For Mexican or Canad <b>Note:</b> If you are utilizing mul 1. CALL SIGN	em during t in effect o e)(2) and ( as explaine ons: With ules, regula e in space on a subs also in spa also in sp	he accounting n June 24, 19 4), or 76.63 (i ed in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta cerning substi sign. Do not I h a station ac streams mush ber the FCC h e, WRC is Ch ne station. whether the si etter "N" (for n oncommercia page (v) of the the local ser age (v) of the es" in column on during the me basis beca is multicast stre n or before Ju mitter or an a o enter "E". If , see page (v	g period, except paragraph. y distant stations horizations: st it in space I (the ation was carried itute basis station report origination coording to its ov t be reported in or has assigned to has a network has a network	(1) stations carri the carriage of cer 1(e)(2) and (4))]; is carried by your the Special Statem d both on a subst ms, see page (v) of the program service er-the-air designs column 1 (list eac column 1 (list eac the television sta- nington, D.C. This ork station, an ind for network multi- or "E-M" (for none ctions located in the mplete column 5, od. Indicate by er totivated channel subject to a royalt etween a cable sy esenting the prima channel on any co	ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program nent and Program Log)—if the itute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- th stream separately; for example tion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial cast), "I" (for independent), "I-M" ommercial educational multicast). the paper SA3 form. es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your itering "LAC" if your cable system capacity. y payment because it is the subject visem or an association representing ary transmitter, enter the designa-	Primary Transmitter
FCC. For Mexican or Canad Note: If you are utilizing mul 1. CALL 2. B'( SIGN CF		ch station. Fo	or U.S. stations.			
1. CALL 2. B'( SIGN CF	idian statio	ons, if any, giv	/e the name of th	ne community wit	h which the station is identifed.	
SIGN CH	ultiple cha	nnel line-ups,	use a separate	space G for each	n channel line-up.	
SIGN CH		CHANN	IEL LINE-UP	D		
	B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
WBBJ-DT	43	N			Jackson, TN	
WJKT	39	I			Jackson, TN	
WLJT	47	Е			Lexington, TN	
WREG	28	N			Memphis, TN	1
WSMV-DT	10	N-M	Yes	0	Nashville, TN	
	10.1	N	Yes	E	Nashville, TN	
WTVF-DT	25	N-M	Yes	0	Nashville, TN	1

.....

	WNER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
West Kentucky Rural Telephone Coop. 062911							
PRIMARY TRANSMI	TTERS: TELEVISIO	ON					
carried by your cabl FCC rules and regu 76.59(d)(2) and (4), substitute program b	e system during t lations in effect or 76.61(e)(2) and ( basis, as explaine	he accounting n June 24, 198 4), or 76.63 (r d in the next p	period, except 31, permitting th eferring to 76.6 paragraph.	(1) stations carrie le carriage of cert 1(e)(2) and (4))]; a	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program	G Primary Transmitter Televisior	
basis under specifc	FCC rules, regula	ations, or auth	orizations:			Televisio	
	ion here in space ed only on a subs		t it in space I (th	e Special Statem	ent and Program Log)—if the		
<ul> <li>List the station her basis. For further in the paper SA3</li> </ul>	re, and also in spa r information conc 6 form.	ace I, if the sta erning substit	ute basis statior	ns, see page (v) c	tute basis and also on some other of the general instructions located		
		-			s such as HBO, ESPN, etc. Identify ition. For example, report multi-		
cast stream as "WE			0	0	h stream separately; for example		
WETA-simulcast). Column 2: Give	the channel num	per the FCC h	as assigned to t	the television stat	ion for broadcasting over-the-air in		
•	•		annel 4 in Wash	ington, D.C. This	may be different from the channel		
on which your cable Column 3: Indica			ation is a netwo	rk station, an inde	ependent station, or a noncommercial		
	• •	•	, ,		cast), "I" (for independent), "I-M" ommercial educational multicast).		
For the meaning of	these terms, see	page (v) of the	e general instruc	ctions located in t	he paper SA3 form.		
Column 4: If the planation of local se				,	es". If not, enter "No". For an ex-		
Column 5: If you	have entered "Y	es" in column	4, you must cor	mplete column 5,	stating the basis on which your		
cable system carried carried the distant s		0	• •		tering "LAC" if your cable system capacity.		
For the retransm	ission of a distant	multicast stre	am that is not s	ubject to a royalty	y payment because it is the subject		
-				•	stem or an association representing ry transmitter, enter the designa-		
tion "E" (exempt). Fo	or simulcasts, also	o enter "E". If	you carried the	channel on any o	ther basis, enter "O." For a further		
					ed in the paper SA3 form. y to which the station is licensed by the		
FCC. For Mexican c Note: If you are utili				•	n which the station is identifed.		
Note. Il you ale utili		• •	•	space G IOI each	channel line-up.		
				-			
			EL LINE-UP				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER				6. LOCATION OF STATION		
SIGN	CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION Cape Girardeau. MO		
SIGN	CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT?	5. BASIS OF CARRIAGE			
SIGN KBSI-HD KBSI-DT	CHANNEL NUMBER 22.1	3. TYPE OF STATION	4. DISTANT?	5. BASIS OF CARRIAGE	Cape Girardeau. MO		
SIGN KBSI-HD KBSI-DT KFVS-DT	CHANNEL NUMBER 22.1 22	3. TYPE OF STATION I I-M	4. DISTANT?	5. BASIS OF CARRIAGE	Cape Girardeau. MO Cape Girardeau. MO		
SIGN KBSI-HD KBSI-DT KFVS-DT KFVS-HD	CHANNEL NUMBER 22.1 22 12	3. TYPE OF STATION I I-M N-M	4. DISTANT?	5. BASIS OF CARRIAGE	Cape Girardeau. MO Cape Girardeau. MO Cape Girardeau. MO		
SIGN KBSI-HD KBSI-DT KFVS-DT KFVS-HD WBBJ-HD	CHANNEL NUMBER 22.1 22 12 12 12.1	3. TYPE OF STATION I-M N-M N	4. DISTANT?	5. BASIS OF CARRIAGE	Cape Girardeau. MO Cape Girardeau. MO Cape Girardeau. MO Cape Girardeau. MO		
	CHANNEL NUMBER 22.1 22 12 12 12.1 43.1	3. TYPE OF STATION I I-M N-M N N	4. DISTANT?	5. BASIS OF CARRIAGE	Cape Girardeau. MO Cape Girardeau. MO Cape Girardeau. MO Cape Girardeau. MO Jackson, TN		
SIGN KBSI-HD KBSI-DT KFVS-DT KFVS-HD WBBJ-HD WBBJ-DT	CHANNEL NUMBER 22.1 22 12 12.1 43.1 43	3. TYPE OF STATION I I-M N-M N N	4. DISTANT?	5. BASIS OF CARRIAGE	Cape Girardeau. MO Cape Girardeau. MO Cape Girardeau. MO Cape Girardeau. MO Jackson, TN Jackson, TN		

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0

Paducah, KY

Paducah, KY

Paducah, KY

Harrisburg, IL

Harrisburg, IL

Nashville, TN

Nashville, TN

WPSD-DT

WPSD-HD

WQWQ-LP

WSIL-HD

WSIL-DT

WTVF-HD

WTVF-DT

32

32.1

9

34.1

34

25.1

25

N-M

Ν

I

Ν

N-M

Ν

N-M

Yes

Yes

Name

G

Primary Transmitters: Television

					ACCOU				
FORM SA3E. PAGE 3.									
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#									
West Kentucky Run	ral Telep	phone Coo	р.		0629	11			
PRIMARY TRANSMITTERS:	TELEVISIO	N							
<ul> <li>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), 07.663 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.</li> <li>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:</li> <li>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 and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</li> <li>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, WC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.</li> <li>Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station on is outside the local service area, (i.e. "distant"), ener "Ne". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 5: If you have entered "Yes" in column 4, you</li></ul>									
		CHANN	EL LINE-UP	F					
1. CALL 2. B'	CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
	HANNEL	OF	(Yes or No)	CARRIAGE					
	UMBER	STATION		(If Distant)	0 0	$\neg$			
KFVS-DT	12	N-M			Cape Girardeau. MO				
WBBJ-DT	43	N			Jackson, TN				
WBBJ-HD	43.1	N			Jackson, TN				
WJKT	39	I			Jackson, TN				
WLJT	47	Е			Lexington, TN				
WREG	28	N			Memphis, TN				
WSMV-DT	10	N-M	Yes	0	Nashville, TN				

WSMV-HD

10.1

Ν

Yes

Ε

Nashville, TN

	00. 2013/2							FORM SASE. FAGE 4.
News	LEGAL NAME OF (	OWNER OF CABL	E SYSTE	И:				SYSTEM ID#
Name	West Kentue	cky Rural T	elepho	ne Coop.				062911
н		t every radio s	tation ca	rried on a separate and discre nerally receivable" by your ca				
Primary				-Band FM Carriage: Under C				
Transmitters:				em whenever it is received at				
Radio				ved at the headend, with the s				
				Copyright Office regulations of	n this point, see	page (vi) of the	e genera	al instructions
	located in the pa			ach station carried.				
				n is AM or FM.				
				al was electronically process	ed by the cable s	ystem as a sei	parate a	nd discrete
	signal, indicate	this by placing	a check	mark in the "S/D" column.				
				on (the community to which th			cor, in th	ne case of
	Mexican or Can	adian stations	, if any, t	he community with which the	station is identifie	ed).		
		AM or FM	0/0				0/0	
	CALL SIGN		S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
	1	1	l		1	1		

LEGAL NAME OF OWNER OF	CABLE SYST	EM:				SYSTEM ID#	
West Kentucky Rural	Felephone	е Соор.				062911	Name
SUBSTITUTE CARRIAGE	: SPECIA						
							1
In General: In space I, identi							•
substitute basis during the ac explanation of the programm							Substitute
1. SPECIAL STATEMENT				0			Carriage:
<ul> <li>During the accounting per</li> </ul>		r cable system	carry, on a substitute basi	s, any nonne	work television prog		Special Statement and
broadcast by a distant stat					Ye		Program Log
<b>Note:</b> If your answer is "No log in block 2.	", leave the	rest of this pag	ge blank. If your answer is '	'Yes," you mu	ist complete the prog	gram	
2. LOG OF SUBSTITUTE	PROGRA	MS					
In General: List each subst	titute progra	im on a separa		wherever pos	sible, if their meaning	g is	
clear. If you need more spa Column 1: Give the title			al pages. ision program (substitute p	rooram) that	during the accountin	na	
period, was broadcast by a	distant stat	ion and that yo	ur cable system substitute	d for the prog	ramming of another	station	
under certain FCC rules, re SA3 form for futher informa							
titles, for example, "I Love L	ucy" or "NE	BA Basketball:	76ers vs. Bulls."		List specific program		
			r "Yes." Otherwise enter "N Isting the substitute progra				
Column 4: Give the broa	adcast static	on's location (th	ne community to which the	station is lice		in	
the case of Mexican or Can	adian static	ons, if any, the	community with which the tem carried the substitute r	station is iden	tified).	month	
first. Example: for May 7 give		when your sys		nografii. Use		nonun	
Column 6: State the time	es when the		gram was carried by your o			ately	
to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	a program carri	ed by a system from 6:01:7	15 p.m. to 6:2	8:30 p.m. should be		
Column 7: Enter the lette			was substituted for progra				
to delete under FCC rules a gram was substituted for pr							
effect on October 19, 1976.		that your byot					
				\//HE	N SUBSTITUTE		
S	UBSTITUT	E PROGRAM	I		AGE OCCURRED	7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — T	0	
					_		
					_		
					_		
	+						
					_		
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FORM SA3E. PAGE 5.

ACCOUNTING P	2015/2							10	RM SA3E. PAGE 6.		
	LEGAL NAME OF C	WNER OF CABLE	SYSTEM:						SYSTEM ID#		
Name	West Kentud	cky Rural Te	elephone Coop.						062911		
J Part-Time Carriage Log	I column 5 of snace G										
			DATES	AND HOURS	DF F	PART-TIME CAF	RIAGE				
		WHEN	I CARRIAGE OCCL	IRRED			WHEN	I CARRIAGE OC	CURRED		
	CALL SIGN		HOUF			CALL SIGN		HO	URS		
		DATE	FROM	TO			DATE	FROM	TO		
									<del>_</del>		
									<b></b>		
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									<b>_</b>		
									<b></b>		
									<del>_</del>		
									-		

FORM	SA3E. PAGE 7.		
LEGA	L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
We	st Kentucky Rural Telephone Coop.	062911	Nume
Inst all a (as page	DSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's sec dentifed in space E) during the accounting period. For a further explanation of how to c e (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	ondary transmission service	<b>K</b> Gross Receipts
<ul> <li>Instru</li> <li>Con</li> <li>Con</li> <li>If you feet</li> <li>If you according to the second seco</li></ul>	<b>RIGHT ROYALTY FEE</b> <b>ctions</b> : Use the blocks in this space L to determine the royalty fee you owe: uplete block 1, showing your minimum fee. uplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the al rom block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable p ompanying this form and attach the schedule to your statement of account.	arts of the DSE Schedule	L Copyright Royalty Fee
bloc	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.		
If particular 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be 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.	ould be entered on line	
	<b>MINIMUM FEE:</b> 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 fe system's gross receipts for the accounting period.		
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$ 727,756.05	
	Enter the result here.		
	This is your minimum fee.	\$ 7,743.32	
Block 2 Block	<ul> <li>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 colur "Yes" in this block.</li> <li>Did your cable system carry any distant television stations during the accounting period yes—Complete the DSE schedule.</li> <li>No—Leave block 3 below blank and c</li> <li>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</li> </ul>	nn 4, you must check	
3	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	409.36	
	Line 3. Add lines 1 and 2 and enter here	\$ 1,099.66	
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	\$ 7,743.32	Cable systems
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero.	r <b>0.00</b>	submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the appropriate
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 8,468.32	form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. ( general instructions located in the paper SA3 form for more information.)	See page (i) of the	

ACCOUNTING PERI	RIOD: 2019/2	ORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: West Kentucky Rural Telephone Coop.	SYSTEM ID# 062911
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       28         2. Enter the total number of activated channels on which the cable system carried television broadcast stations       28         and nonbroadcast services       280	
N Individual to Be Contacted for Further	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)         Name       Patti Taylor         Telephone	
Information	Address 237 N 8th Street (Number, street, rural route, apartment, or suite number) Mayfield, KY 42066 (City, town, state, zip)	
	Email Fax (optional)	
O Certifcation	<ul> <li>CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.</li> <li>I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> </ul>	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	<ul> <li>(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as ident in line 1 of space B and that the owner is not a corporation or partnership; or</li> <li>(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 in line 1 of space B.</li> </ul>	
	<ul> <li>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.</li> <li>[18 U.S.C., Section 1001(1986)]</li> </ul>	
	X /s/ Tiffany Myers	
	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 pr "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility set Typed or printed name: <b>Tiffany Myers</b>	
	Title: Chief Financial Officer (Title of official position held in corporation or partnership)	
	Date: 1.16.2020	

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

FORM	SA3E	PAGE9.
FORM	SAJE.	FAGES.

LEGAL NAME OF OWNER OF CABLE SYSTEM: West Kentucky Rural Telephone Coop.	S	VSTEM ID# 062911	Name
<ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECI The Satellite Home Viewer Act of 1988 amended Title 17, section lowing sentence:         <ul> <li>"In determining the total number of subscribers and the gro service of providing secondary transmissions of primary bro scribers and amounts collected from subscribers receiving</li> </ul> </li> <li>For more information on when to exclude these amounts, see the paper SA3 form.</li> <li>During the accounting period did the cable system exclude any an made by satellite carriers to satellite dish owners?</li> <li>X NO</li> <li>YES. Enter the total here and list the satellite carrier(s) below.</li> </ul>	111(d)(1)(A), of the Copyright Act by adding the base amounts paid to the cable system for the base address transmitters, the system shall not incluse condary transmissions pursuant to section 1 note on page (vii) of the general instructions in mounts of gross receipts for secondary transmissions and the secondary transmissions for seco	ne fol- asic ide sub- 119." n the	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address	Name Mailing Address		
You must complete this worksheet for those royalty payments sub For an explanation of interest assessment, see page (viii) of the g		ayment.	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	э х	- days	
Line 3 Multiply line 2 by the number of days late and enter the su	um here		
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block space L, (page 7)	<b>\$</b>	-	
<ul> <li>* To view the interest rate chart click on www.copyright.gov/lick contact the Licensing Division at (202) 707-8150 or licensing</li> <li>** This is the decimal equivalent of 1/365, which is the interest</li> </ul>	j@loc.gov.	- /	
NOTE: If you are filing this worksheet covering a statement of according please list below the owner, address, first community served, according.		original	
Owner Address			
First community served Accounting period ID number			
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Co	opyright Offce to collect the personally identifying informatic	on (PII) requested on	th

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

#### INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

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

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

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

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

Independent: its type-value is	1.00
• Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing 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 particula station's DSE for the accounting period.

#### TOTAL OF DSEs

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

#### THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee anc 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 nor subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment

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

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

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable sys-

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

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following: 1) A station actually carried within any portion of a cable system prior

to June 25, 1981, pursuant to the former FCC rules. 2) A station first carried after June 24, 1981, which could have been

carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.

3) A station of the same type substituted for a carried network, noncommercial educational, or regular independent station for which *a* quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.

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

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

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

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

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

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

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

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

## DSE SCHEDULE. PAGE 11.

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

Determine whether any of the stations you carried were partially distantthat 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 DSF 1.064% of gross receipts

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

## 0.330% of gross receipts PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

If any of the stations were partially distant:

1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.

2. Identify the communities/areas represented by each subscriber group. 3. For each subscriber group, calculate the total number of DSEs of

that group's complement of stations. If your system is located wholly outside all major and smaller television markets, give each station's DSEs as you gave them in parts 2, 3, and 4 of the schedule: or

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

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

TOTAL DSEs

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

CITY

Santa Rosa

Bodega Bay

Rapid City

Fairvale

DSE

1.0

1.0

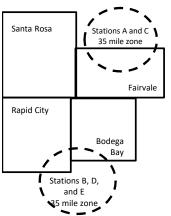
0.083

0.139

0.25

2.472

Distant Stations Carried STATION In most cases under current FCC rules, all of Fairvale would be within A (independent) B (independent) the local service area of both stations C (part-time) A and C and all of Rapid City and Bo-D (part-time) dega Bay would be within the local service areas of stations B, D, and E. E (network)



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

Identification of Subscriber Groups

OUTSIDE LOCAL

Stations A and C

Stations A and C

Stations B. D. and E

TOTAL GROSS RECEIPTS

SERVICE AREA OF

Stations A, B, C, D ,E

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

GROSS RECEIPTS

\$310,000.00

100,000.00

70,000.00

120,000.00

\$600,000.00

FROM SUBSCRIBERS

## DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM:									
1	West Kentucky Rural Te	elephone Coc	op.			062911				
	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.         2.00									
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5									
Computation of DSEs for	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- mercial educational station, give the DSE as ".25."									
Category "O"	CATEGORY "O" STATIONS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	WKPD	0.250								
	WNPT-DT	0.250								
	WSMV-DT	0.250								
	WTVF-DT	0.250								
Add rows as	WUPX-DT	1.000								
necessary.										
Remember to copy										
all formula into new										
rows.										
		II		L						

3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel S Capacity	Instructions: CAPAC Column 1: List the ca Column 2: For ea figure should correspo Column 3: For ea Column 4: Divide be carried out at least Column 5: For ea give the type-value as Column 6: Multip third decimal point. Th A3 form.	Ill sign of all dista ich station, give ti ond with the inform ich station, give ti the figure in colu- to the third decir ich independent s 5 ".25." Ity the figure in co- nis is the station's	he number of mation given i he total numb umn 2 by the f nal point. This station, give th lumn 4 by the DSE. (For m CATEGORY R JRS D BY	hours your in space J. er of hours igure in co s is the "ba ne "type-va figure in c ore informa <u>/ LAC ST</u> 3. NUMI	r cable syster Calculate on that the stati lumn 3, and g sis of carriage lue" as "1.0." olumn 5, and ation on roune FATIONS: 0 BER OURS	n carried the sta ly one DSE for e ion broadcast ov jive the result in e value" for the s For each netwo give the result in ding, see page ( COMPUTATI 4. BASIS OF CARRIAG	tion during the ac each station. er the air during t decimals in colur station. rk or noncommer n column 6. Rour viii) of the genera ON OF DSEs 5.	the accounting p nn 4. This figure cial educational nd to no less that I instructions in	period. e must I station, an the	
1		2. NUMBE OF HOU CARRIE	R JRS ED BY M	3. NUMI OF H STAT	BER OURS	4. BASIS OF CARRIAG	5.	TYPE	6. DSE	:
			÷		IR	VALUE				
					=		x		=	
s			÷ ÷				x x		=	
s			÷				×		Ē	
s			÷		=		x		=	
s			÷		=		x		=	
s			÷		=		x x		=	
	space I). Column 2: For each t your option. This figu Column 3: Enter the Column 4: Divide the ecimal point. This is the	ure should corres e number of days ne figure in colum	spond with the s in the calend in 2 by the fig	e informatio lar year: 36 ure in colu	on in space I. 65, except in a mn 3, and giv	a leap year. ⁄e the result in co	blumn 4. Round to	o no less than ti	he third	n).
		SU	BSTITUTE	-BASIS	STATION	S: COMPUTA	TION OF DS	Es		
	SIGN OF	MBER DGRAMS	3. NUMB OF DA' IN YEA	YS .R	. DSE	1. CALL SIGN	2. NUMBE OF PROGR	AMS IN	IUMBER F DAYS N YEAR	4. DS
		÷ ÷		=				÷ ÷	= =	
				=				÷	=	
		÷		=				÷	=	;
		÷		=				÷	=	
	UM OF DSEs OF SU dd the DSEs of each Enter the sum here	station.	IS STATIONS	6:		······		÷ 0.00		
				e boxes in p	oarts 2, 3, and	4 of this schedule	e and add them to	provide the tota		
~	umber of DSEs applica	, 0, 0.01								
							▶	2.00	<u>)</u>	
<b>D</b> nu	umber of DSEs applica	rom part 2●						2.00 0.00		

LEGAL NAME OF C	WNER OF CABLE	SYSTEM:					S	YSTEM ID#	
West Kentuck	y Rural Teleph	none Coop	-					062911	Name
Instructions: Blo In block A:		•	part 6 and part	7 of the DSE sche	dule blank a	nd complete p	art 8 (page 16) of	f the	6
schedule.			·				arro, (page 10) of	inc.	U
<ul> <li>If your answer if</li> </ul>	"No," complete blo			ELEVISION M	ARKETS				Computation of
				aller markets as de		ection 76.5 of	FCC rules and re	gulations in	3.75 Fee
			O NOT COM	PLETE THE REM	AINDER OF F	PART 6 AND 7	7		
						~			
Column 1:				IAGE OF PERI				d 40. 00.000 /	
CALL SIGN	under FCC rules	and regulatione DSE Sche	ons prior to Ju dule. (Note: T	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r Act of 2010.)	urther explana	ation of permit	ted stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	<ul> <li>(Note the FCC rule)</li> <li>A Stations carring 76.61(b)(c)]</li> <li>B Specialty static</li> <li>C Noncommercian</li> <li>D Grandfathered</li> </ul>	ules and regu ed pursuant t on as defined al education d station (76.0	lations cited b o the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag	usis on which you of elow pertain to tho rket quota rules [7 76.59(d)(1), 76.61( 9(c), 76.61(d), 76. rraph regarding su	se in effect o 6.57, 76.59(b e)(1), 76.63(a 63(a) referrin	n June 24, 19 ), 76.61(b)(c), ) referring to 7 g to 76.61(d)	76.63(a) referring 76.61(e)(1	g ta	
	•	ant to individu viously carrie JHF station w	ual waiver of F ed on a part-tin ithin grade-B	ne or substitute ba contour, [76.59(d)(	•		ferring to 76.61(e)	(5)	
Column 3:	*( <b>Note:</b> For those this schedule to	e stations ide determine the	ntified by the I DSE.)	n parts 2, 3, and 4 etter "F" in column	2, you must	complete the		I	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
	C	0.25							
WNPT-DT WSMV-DT	C D	0.25 0.25							
WTVF-DT	D	0.25							
WUPX-DT	С	1.00							
			l						
								2.00	
		В	LOCK C: CC	MPUTATION OF	- 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule					
Line 2: Enter the	e sum of permitte	ed DSEs fror	n block B ab	ove					
Line 3: Subtract (If zero, I	line 2 from line 1 eave lines 4–7 b	l . This is the blank and pro	total numbe pceed to part	r of DSEs subjec 7 of this schedu	t to the 3.75 le)	rate.			
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375	and enter su	ım here						permited/ partially nonpermitted
Line 6: Enter tot	al number of DS	Es from line	3				X		carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ai	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

DSE SCHEDULE. PAGE 13.

<b>-</b>								[	DSE SCHEDULE. PAGE 14.			
Name	LEGAL NAME OF OWN								SYSTEM ID#			
Name	West Kentucky	Rural Telepho	ne Coop.						062911			
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the FC A—Part-time sp 76.59( B—Late-night pr 76.61( S—Substitute ca genera Column 5: Indicate Column 6: Compare in block	or to June 25, 1981, call sign for each dis the DSE for this sta the accounting peri the basis of carriag CC rules and regula ecialty programming (d)(1),76.61(e)(1), o rogramming: Carriag (e)(3)). arriage under certain al instructions in the the station's DSE fo e the DSE figures lis B, column 3 of part information you give	under former stant station i tition for a sing od and year i e on which th titions cited be g: Carriage, o r 76.63 (refer ge under FCC n FCC rules, paper SA3 fo or the current sted in colum 6 for this sta	r FCC rules gov dentifed by the gle accounting p n which the carri- e station was ca elow pertain to ti n a part-time ba ring to 76.61(e) C rules, sections regulations, or a form. accounting per ns 2 and 5 and tion. 2, 3, and 4 mus	ernir letter perio riage arried hose asis, (1)). 5 76.1 autho iod a list th	tifed by the letter "F" ng part-time and sub r "F" in column 2 of p d, occurring between a and DSE occurred d by listing one of th in effect on June 24 of specialty program 59(d)(3), 76.61(e)(3) orizations. For furthe as computed in parts he smaller of the two accurate and is subj	stitute carria part 6 of the I in January 1, (e.g., 1981/1 e following le 4, 1981. Iming under 0, or 76.63 (re r explanation 2, 3, and 4 of figures here	ge. DSE schedule 1978 and Jur ) etters FCC rules, se eferring to n, see page (v of this schedu e. This figure s	ne 30, 1981 ection: /i) of the lle should be entered			
	PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BA											
	4.0411				ט ט:							
	1. CALL	2. PRIOR		COUNTING		4. BASIS OF	-	ESENT	6. PERMITTED			
	SIGN	DSE	PI	ERIOD		CARRIAGE	D	SE	DSE			
<b>7</b> Computation of the Syndicated	,	"Yes," complete blo	ocks B and C, B and C blanl	k and complete								
Exclusivity	BLOCK A: MAJOR TELEVISION MARKET											
Surcharge	<ul> <li>Is any portion of the c</li> </ul>	cable system within a	ton 100 maio	or television mar	(et a	s defined by section 7	6.5 of ECC ri	iles in effect. I	une 24 19812			
ourcharge		-			ver a				une 24, 1901:			
	Yes—Complete	blocks B and C .				No—Proceed to	part 8					
	BLOCK B: Ca	arriage of VHF/Grad	le B Contour	Stations	BLOCK C: Computation of Exempt DSEs				pt DSEs			
		ion that places a gra	r, in whole	Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refe to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8.				31, 1972? (refe				
		I II		,	,	[			1			
	CALL SIGN	DSE (	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N DSE			
							.					
							Ц.					
		Τ.	OTAL DSEs	0.00	'		·	TOTAL DS	Es <b>0.00</b>			
		L					L					

DSE SCHEDULE.	PAGE15.
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LEGAL NA	ME OF OWNER OF CABLE SYSTEM: West Kentucky Rural Telephone Coop.	SYSTEM ID# 062911	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	727,756.05	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.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?     X Yes—Complete part 9 of this schedule.     No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here	_	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
30	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 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 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 D is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

DSE	SCHEE	ULE.	PAGE	16

	LEGAL NAM	DSE SCHEDUL ME OF OWNER OF CABLE SYSTEM:	_E. PAGE 16. <b>YSTEM ID#</b>							
Name		West Kentucky Rural Telephone Coop.	062911							
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).       ▶ \$         B. Enter 0.00189 of gross receipts (the amount in section 1).       ▶ \$								
Name     Section 4b       7     Section 4b       Computation of the Syndicated Exclusivity Surcharge     Instruktion 1000000000000000000000000000000000000	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								
4b       If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4 a blank.         Computation of the Syndicated Exclusivity       A. Enter 0.00300 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								
Computation of	You m 6 was • In blo • If you • If you blank What i were lo	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. 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 below the station of a station is "partially distant" if, at the time your system carried it, some of your subscribers bocated within that station's local service area and others were located outside that area. For the definition of a station's "local								
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS									
	X     Yes—Complete part 9 of this schedule.         No—Complete the following sections.									
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE								
		Enter the amount of gross receipts from space K (page 7)	_							
		(If block A of part 6 was checked "Yes,"	_							
		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 and in block 3, line 1, space L (page 7)	0.00							
		Base Rate Fee								

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Nome
West	Kentucky Rural Telephone Coop. 062911	Name
Section	If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.	
4		o
	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) <b>S</b>	of
	C. Multiply line B by 3.000 and enter here	Base Rate Fee
	D. Enter 0.00330 of gross receipts	
	(the amount in section 1) ▶ \$	
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here ▶	
	F. Multiply line D by line E and enter here ▶ \$	
	G. Add lines A, C, and F. This is your base rate fee.	
	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee <b>0.00</b>	
IMPOR	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall	
	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in	9
Space	ع. eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	-
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this	Computation of
exclusio	on, you must:	Base Rate Fee
	livide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and Syndicated
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of Ind the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity
	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must	Partially
	mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, cable system is wholly located outside all major television markets, complete block A only.	Distant
		Stations, and for Partially
	Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant station you	Permitted
•	to that community.	Stations
-	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located	
	the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne token, the station is distant to the subscriber.)	
	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable	
•	will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
Groups.	tting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber	
	section:	
	y the communities/areas represented by each subscriber group.	
	he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the bers in the group.	
• lf:		
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3,	
	f this schedule; or,	
, .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
•	e DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions	
in the	paper SA3 form.	
•	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding n making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total	
DSEs f	or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your	
actual o	calculations on the form.	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY	STEM I
Name	West Kentucky Rural Telephone Coop.	0629 <sup>-</sup>
	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.	
	<b>Step 3:</b> Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge.	
	Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams	
	Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from	
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate	•
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream.	
	You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNE West Kentucky Ru						SY	STEM ID# 062911	Name
BI				TE FEES FOR EACH				
		SUBSCRIBER GROU	Р			SUBSCRIBER GROU	P	9
COMMUNITY/ AREA	Beulah			COMMUNITY/ AREA	Brazil, E	aton		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
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	<u>\$</u> 130,	996.09	Gross Receipts Secor	nd Group	<u>\$</u> 2	1,832.68	
Base Rate Fee First Gr	•	\$	0.00	Base Rate Fee Secor	•	\$	0.00	
		SUBSCRIBER GROU	P			SUBSCRIBER GROU	P	
COMMUNITY/ AREA	Browns	Grove & Others		COMMUNITY/ AREA	Churcht	on, i rimble		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				WSMV-DT	0.25			
						-		
Total DSEs			0.00	Total DSEs			0.25	
Gross Receipts Third G	iroup	\$ 7,	277.56	Gross Receipts Fourth	n Group	<u>\$</u> 3	6,387.80	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourth	n Group	\$	96.79	
Base Rate Fee: Add th Enter here and in block			iber group	as shown in the boxes a	above.	\$	690.29	

CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Image: Contract of the second secon			LE SYSTEM: phone Coop.					O62911	Na
COMMUNITY/AREA       Coldwater, Dexter, Kirksey       Community/AREA       Cottage Grove, Buchanan, Puryear       or         CALL SIGN       DSE       CALL SIGN <td< th=""><th> B</th><th>LOCK A:</th><th>COMPUTATION C</th><th>F BASE RA</th><th>ATE FEES FOR EAC</th><th>CH SUBSCRI</th><th>BER GROUP</th><th></th><th></th></td<>	B	LOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCRI	BER GROUP		
CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       Base         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       Base         CALL SIGN       DSE       CALL SIGN       D		FIFTH	SUBSCRIBER GRO	OUP		SIXTH	SUBSCRIBER GRC	UP	~
CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Image: Contract of the second secon	OMMUNITY/ AREA	Coldwa	ater, Dexter, Kirk	ksey	COMMUNITY/ ARE	A Cottage	Grove, Buchana	an, Puryear	Compu
WUPX-DT       1.00         Image: Second Group       Image: Second Group	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	0
Image: Second Group       Image: Second Group<					WNPT-DT	0.25			Base R
Total DSEs       0.00         Gross Receipts First Group       \$         \$       254,714.62         Base Rate Fee First Group       \$         \$       0.00         Base Rate Fee Second Group       \$         \$       90.19         COMMUNITY/ AREA       Cunningham, Kirbyton         CALL SIGN       DSE         CALL SIGN       DSE					WUPX-DT	1.00			an
Image: Second Group       Image: Second Group<									Syndi
indiana       indiana       indiana       indiana       indiana       indiana         indiana       indiana       indiana       indiana       indiana       indiana       indiana         indiana       indiana       indiana       indiana       indiana       indiana       indiana       indiana         indiana       indiana       indiana       indiana       indiana       indiana       indiana       indiana         indiana       indiana       indiana       indiana       indiana       indiana       indiana       indiana         indiana       india       indiana       indiana									Exclu
Gross Receipts First Group       \$       254,714.62       Gross Receipts Second Group       \$       7,277.56         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       90.19         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         COMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE									Surch
Stross Receipts First Group       \$       254,714.62       Gross Receipts Second Group       \$       7,277.56         Hase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       90.19         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         COMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE									fo
stross Receipts First Group       stross Receipts Second Group         ase Rate Fee First Group       stross Receipts Second Group       stross Receipts Second Group       stross Receipts Second Group       stross Receipts Second Group         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         OMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE									Parti
Stross Receipts First Group       \$       254,714.62       Gross Receipts Second Group       \$       7,277.56         Hase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       90.19         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         COMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE			-						Dista
s       254,714.62       Gross Receipts Second Group       \$       7,277.56         ase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       90.19         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         OMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE									Statio
ross Receipts First Group       \$       254,714.62       Gross Receipts Second Group       \$       7,277.56         ase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       90.19         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         OMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE									
ross Receipts First Group       \$       254,714.62       Gross Receipts Second Group       \$       7,277.56         ase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       90.19         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         OMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE			-						
Stross Receipts First Group       \$       254,714.62       Gross Receipts Second Group       \$       7,277.56         Hase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       90.19         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         COMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE									
Stross Receipts First Group       \$       254,714.62       Gross Receipts Second Group       \$       7,277.56         Hase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       90.19         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         COMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE									
Stross Receipts First Group       \$       254,714.62       Gross Receipts Second Group       \$       7,277.56         Hase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       90.19         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         COMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE									
stross Receipts First Group       stross Receipts Second Group         ase Rate Fee First Group       stross Receipts Second Group       stross Receipts Second Group       stross Receipts Second Group       stross Receipts Second Group         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         OMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE									
ase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       90.19         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         OMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE	otal DSEs			0.00	Total DSEs			1.25	
Iase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       90.19         SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         COMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE	ross Receints First (	froup	\$ 25	4.714.62	Gross Receipts Sec	ond Group	\$	7.277.56	
SEVENTH SUBSCRIBER GROUP       EIGHTH SUBSCRIBER GROUP         OMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE		noup	÷ 20	4,114.02			<u>*</u>	1,211.00	
COMMUNITY/ AREA       Cunningham, Kirbyton       COMMUNITY/ AREA       Faxon, H.Grove, L.Grove, Lville         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE	ase Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	90.19	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE		SEVENTH	SUBSCRIBER GRO	OUP		EIGHTH	SUBSCRIBER GRC	UP	
	OMMUNITY/ AREA	Cunnin	igham, Kirbyton		COMMUNITY/ ARE	A Faxon, H	I.Grove, L.Grove	e, Lville	
Image: Constraint of the second of the se	CALL SIGN	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
					WKPD	0.25			
			-						
			-						
		<mark></mark>							
		<mark></mark>							
		<mark></mark>							
			-						
		<mark></mark>	-						
		<mark></mark>	-						
		<mark></mark>							
otal DSEs 0.00 Total DSEs 0.25		_		0.00				0.25	
	UIAI DOES								
bross Receipts Third Group <u>\$ 130,996.09</u> Gross Receipts Fourth Group <u>\$ 21,832.68</u>				0 000 CC	Gross Receipts Fou	rth Group	\$	21,832.68	
ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 58.07	Gross Receipts Third	Group	<u>\$ 13</u>	0,996.09					

LEGAL NAME OF OWNE West Kentucky Ri						S	VSTEM ID# 062911	Name
B		COMPUTATION OF		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Mason	Hall		COMMUNITY/ AREA	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WKPD	0.25							Base Rate Fee
WTVF-DT	0.25							and Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.50	Total DSEs 0.00				
Gross Receipts First Group \$ 7,277.56		,277.56	Gross Receipts Seco	nd Group	\$	7,277.56		
Base Rate Fee First G	roup	\$	38.72	Base Rate Fee Seco	nd Group	\$	0.00	
ELEVENTH SUBSCRIBER GROUP								
COMMUNITY/ AREA	Yorkvill	e		COMMUNITY/ AREA	Fairdea	ling, Hardin		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WSMV-DT	0.25					-		
WTVF-DT	0.25							
						-		
						-		
						-		
						-		
						-		
						-		
						-		
Total DSEs			0.50	Total DSEs			0.00	
Gross Receipts Third C	Group	<u>\$</u> 72	,775.61	Gross Receipts Fourt	th Group	\$	21,832.68	
Base Rate Fee Third C	Group	\$	387.17	Base Rate Fee Fourth Group \$ 0.00			0.00	
Base Rate Fee: Add th			criber group	as shown in the boxes	above.			
Enter here and in block	< 3, line 1, s	space L (page 7)				\$		

TORWOAJE. TAOL 13	FORM	SA3E.	PAGE	19.
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LEGAL NAME OF OWNE West Kentucky Ru						SY	STEM ID# 062911	Name
				TE FEES FOR EACH				
		SUBSCRIBER GROU	JP		JRTEENTH	SUBSCRIBER GROUI		9
COMMUNITY/ AREA	Hazel, I	New Concord	lew Concord COMMUNITY/ AREA 0				Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WKPD	0.25							Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			0.25	Total DSEs			0.00	
Gross Receipts First Group         \$         7,277.56			Gross Receipts Second Group \$ 0.00					
Base Rate Fee First Group \$ 19.36 Base Rate Fee Second Group \$ 0.00					0.00			
FIF	TEENTH	SUBSCRIBER GROU	JP	S	IXTEENTH	SUBSCRIBER GROU	P	
COMMUNITY/ AREA 0			COMMUNITY/ AREA 0			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	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes a	above.	\$		

### FORM SA3E. PAGE 19.

		phone Coop.					062911
BI	LOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EA	CH SUBSCR	BER GROUP	
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	UP
OMMUNITY/ AREA	Beulah	COMMUNITY/ A		COMMUNITY/ ARE	EA Brazil, E	aton	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
				WTVF-DT	0.25		
		F		WSMV-DT	0.25		
		H					
al DSEs			0.00	Total DSEs			0.50
Gross Receipts First Group \$ 130,996.09		996.09	Gross Receipts Second Group		\$	21,832.68	
e Rate Fee First G	roup	\$	0.00	Base Rate Fee Se	cond Group	\$	409.36
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP
MUNITY/ AREA		s Grove & Others		COMMUNITY/ ARE			
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	<u> </u>	11					
		<b>[</b>				-	
				· · · · · · · · · · · · · · · · · · ·			
al DSEs			0.00	Total DSFs			0.00
			0.00	Total DSEs			0.00
	) Jroup	<u>\$</u> 7,	0.00 277.56	Total DSEs Gross Receipts Fo	urth Group	\$	0.00
otal DSEs ross Receipts Third C	·		277.56	Gross Receipts Fo	·		36,387.80
	·	ss			·	S S	
oss Receipts Third C	·		277.56	Gross Receipts Fo	·		36,387.80
ss Receipts Third C e Rate Fee Third C	Group The <b>base rat</b>	\$ te fees for each subsc	0.00	Gross Receipts Fo	urth Group		36,387.80

FORM SA3E. PAGE 19
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## Nonpermitted 3.75 Stations

EGAL NAME OF OWNE						S	YSTEM ID# 062911
B	LOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP	
		SUBSCRIBER GROU			SIXTH SUBSCRIBER GROUP		
COMMUNITY/ AREA	TY/ AREA Coldwater, Dexter, Kirksey		COMMUNITY/ AREA	Cottage Grove, Buchanan, Puryear			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-				-	
		-		1 1111111111111111111111111111111111111			
						-	
		-					
						-	
		-					
otal DSEs			0.00	Total DSEs			0.00
ross Receipts First G	roup	\$ 254	,714.62	Gross Receipts Secon	d Group	\$ 7,277.56	
			,			·	
<b>ase Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00
:	SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	SUBSCRIBER GROU	JP
OMMUNITY/ AREA	Cunnin	gham, Kirbyton		COMMUNITY/ AREA	Faxon, I	H.Grove, L.Grove	, Lville
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		_					
		_					
		-					
		-					
		-					
		-					
		_					
otal DSEs			0.00	Total DSEs			0.00
ross Receipts Third (	Group	<u>\$</u> 130	,996.09	Gross Receipts Fourth	Group	\$	21,832.68
ase Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00
	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00
ase Rate Fee Third C	-			Base Rate Fee Fourth		\$	0.00

## FORM SA3E. PAGE 19.

Vest Kentucky R	ural Tele	phone Coop.					062911
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP	
NINTH SUBSCRIBER GROUP			JP	TENTH SUBSCRIBER GROUP			UP
OMMUNITY/ AREA	Mason	Hall		COMMUNITY/ ARE	A Melber		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-					
al DSEs			0.00	Total DSEs			0.00
oss Receipts First G	roup	\$ 7.	277.56	Gross Receipts Sec	ond Group	\$	7,277.56
<b>e Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
E	LEVENTH	SUBSCRIBER GROU	JP		TWELVTH	SUBSCRIBER GRO	UP
/MUNITY/ AREA	Yorkvi	lle		COMMUNITY/ AREA Fairdealing, Hardin			
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-					
al DSEs			0.00	Total DSEs			0.00
oss Receipts Third 0	Group	\$ 72	775.61	Gross Receipts Fou	rth Group	\$	21,832.68
ase Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00
	•	Ļ				ļ	
se Rate Foo: Add th	haen ro	to face for each outer	riber group	as shown in the here	s above		
se Rate Fee: Add the fee and in block			nber group	as shown in the boxe	s apove.	\$	
	,,						

FORM SA3E. PA	AGE 19.
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				TE FEES FOR EAC		IBER GROUP	IIP
THIRTEENTH SUBSCRIBER GROUP OMMUNITY/ AREA Hazel, New Concord			01	COMMUNITY/ ARE			0
	nazei,					•	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-					
		-					
		-					
		-					
		[]					
tal DSEs			0.00	Total DSEs			0.00
Gross Receipts First Group \$ 7,277.56		,277.56	Gross Receipts Second Group \$ (		0.00		
se Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
		SUBSCRIBER GRO				SUBSCRIBER GRO	
/MUNITY/ AREA			0	COMMUNITY/ ARE/	A		0
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-					
		-					
		-					
				Total DSEs			0.00
tal DSEs			0.00				0.00
otal DSEs ross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00
	Group	\$			rth Group	\$	
		\$\$				\$	

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		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: West Kentucky Rural Telephone Coop.	SYSTEM ID# 062911
	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 Syndicated Exclusivity Surcharge. Indicate which major television market 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 Sum dia stand	Step 1: In line 1, give the total DSEs by subscriber group for commerce	ial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity Surcharge	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group fo Exempt DSEs in block C, part 7 of this schedule. If none enter	zero.
for Partially Distant Stations	<ul> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of</li> <li>Step 4: Compute the surcharge for each subscriber group using the fo</li> <li>schedule. In making this computation, use gross receipts figur</li> <li>your actual calculations on this form.</li> </ul>	
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	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	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea in the boxes above. Enter here and in block 4, line 2 of space L (page 7	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#					
Name	West Kentucky Rural Telephone Coop.	062911					
	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 Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:						
Computation of		Second 50 major television market					
Base Rate Fee	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commerc	ial V/HE Crade R contour stations listed in block A part 0 of					
and Syndicated Exclusivity Surcharge	<ul> <li>Step 1. In line 7, give the total DSEs by subscriber group for commerce this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter</li> </ul>	r the VHF Grade B contour stations that were classified as					
for Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not ne						
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP					
	Line 1: Enter the V/JE DSEe	Line 1: Enter the VHE DSEs					
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs					
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1					
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for					
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge					
	computation	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 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 SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group					
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea in the boxes above. Enter here and in block 4, line 2 of space L (page 7						

Name         West Kentucky Rural Telephone Coop.         062           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 I part 7, you mustalso compute a Syndicated Exclusivity Torrange. Indicate which major television market and the station is not exempt I part 7, you mustalso compute a Syndicated Exclusivity Torrange. Indicate which major television market and the station is not exempt I part 7, you mustalso compute a Syndicated Exclusivity Torrange. Indicate which major television market and the station is not exempt I part 7, you mustalso compute the sucharge.           Step 1: In line 1, give the total DSEs by subscriber group for the 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 to subcoriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If mome enter zero.           Step 3: In line 3, subtract line 2 from line 1 me3, subtract line 2 from line 1 me3, subtract line 2 from line 1 me3, subtract line 2 from line 1 mis subcoriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In market provide a subcompt the surcharge.           Step 3: In line 3, subtract line 2 from line 1 mis 1 me3, subtract line 2 from line 1 mis 1 me3, subtract line 2 from line 1 mis 1 me3, subtract line 2 from line 1 mis 1 me3, subtract line 2 from line 1 mis 1 me3, subtract line 2 from line 1 mis 1 me3, subtra
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:         Base Rate Fea and Syndicated Exclusivity Surcharge for any subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.       In line 1, give the total DSEs by subscriber group for the VHF Grade B contour stations insted in block A, part 9 of this schedule. In line 2, give the total number of DSEs used to compute the surcharge.         9       Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations insted in block A, part 9 of this schedule. In making this computation, use group using the formula outlined in block D, part 7 of this schedule. In making this computation, use group using the formula outlined in block D, part 7 of this schedule. In making this computation, use group using the formula outlined in block D, part 7 of this schedule. In making this computation, use group using the formula outlined in block D, part 7 of this schedule. In making this computation, use group using the formula outlined in block D, part 7 of this subscriber group subject be the surcharge computation use of DSEs for this subscriber group subject to the surcharge computation are computed to surcharge computation are computed to surcharge computation computed to surc
Y       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 and Syndicated Exclusivity Surcharge. It 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 DSEs by subscriber group for the VHF Grade B contour stations listed in block A, part 9 of this schedule.         Step 2: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.         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.         NINTH SUBSCRIBER GROUP       TENTH SUBSCRIBER GROUP         Line 1: Enter the VHF DSEs       Line 1: Enter the VHF DSEs         Line 3: Subtract line 2 from line 1       and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
Computation of
Base Rate Fee and Syndicated Exclusivity       INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of 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 more 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.         NINTH SUBSCRIBER GROUP       TENTH SUBSCRIBER GROUP         Line 1: Enter the VHF DSEs
Syndicated Exclusivity Surcharge for       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 by 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 for this subscriber group subject to the surcharge computation
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.         NINTH SUBSCRIBER GROUP       TENTH SUBSCRIBER GROUP         Line 1:       Enter the VHF DSEs         Line 2:       Enter the Exempt DSEs for         this subscriber group       Line 1:         subject to the surcharge computation       -         synblcATED EXCLUSIVITY       SynDICATED EXCLUSIVITY         SURCHARGE       First Group         First Group       Second Group         Line 2:       Enter the VHF DSEs         Line 2:       Enter the VHF DSEs         SynDICATED EXCLUSIVITY       SynDICATED EXCLUSIVITY         Surger       Second Group       Second Group         Line 2:       Enter the VHF DSEs       Line 1:         Line 2:       Enter the VHF DSEs       Line 2:         Line 1:       Enter the VHF
Partially Distant 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
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         SYNDICATED EXCLUSIVITY       SUNCHARGE       First Group       SYNDICATED EXCLUSIVITY         SURCHARGE       First Group       \$       SUNCHARGE         First 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       \$         Line 3: Subtract line 2 from line 1       Line 3: Subtract line 2 from line 1       \$         Line 3: Subtract line 2 from line 1       Line 3: Subtract line 2 from line 1       Line 3: Subtract line 2 from line 1         Line 3: Subtract line 2 from line 1       and enter here. This is the       Line 3: Subtract line 2 from line 1
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       SYNDICATED EXCLUSIVITY         SURCHARGE       SYNDICATED EXCLUSIVITY         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 2:         Line 3:       Subtract line 2 from line 1       Line 3:       Subtract line 2 from line 1       Line 3:       Subtract line 2 from line 1         and enter here. This is the       Line 3:       Subtract line 2 from line 1       Line 3:       Subtract line 2 from line 1
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       Line 3: Subtract line 2 from line 1 and enter here. This is the
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       Line 3: Subtract line 2 from line 1 and enter here. This is the
Line 3: Subtract line 2 from line 1       Line 3: Subtract line 2 from line 1         and enter here. This is the       and enter here. This is the
and enter here. This is the and enter here. This is the
this subscriber group     this subscriber group       subject to the surcharge     subject to the surcharge       computation     -
SYNDICATED EXCLUSIVITY       SYNDICATED EXCLUSIVITY         SURCHARGE       SURCHARGE         Third 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)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Name	West Kentucky Rural Telephone Coop.	062911	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY 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	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 commerc	ial VHF Grade B contour stations listed in block A, part 9 of	
Syndicated Exclusivity Surcharge	this schedule. <b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group fo Exempt DSEs in block C, part 7 of this schedule. If none enter	zero.	
for Partially Distant Stations	<ul> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of</li> <li>Step 4: Compute the surcharge for each subscriber group using the fo</li> <li>schedule. In making this computation, use gross receipts figur</li> <li>your actual calculations on this form.</li> </ul>		
	THIRTEENTH SUBSCRIBER GROUP	FOURTEENTH SUBSCRIBER GROUP	
		I CONTEENIN CODOCIDEN CINCOL	
	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	
	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 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 Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea in the boxes above. Enter here and in block 4, line 2 of space L (page 7		