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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are located in the first tab of this workbook.

| FOR COPYRIGHT | OFFICE USE ONLY |
|---------------|----------------------|
| DATE RECEIVED | AMOUNT |
| 02/23/2021 | \$ ALLOCATION NUMBER |

Return completed workbook by email to:

coplicsoa@loc.gov

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

| Α | ACCOUNTING PERIOD COVERED BY THIS STATEMENT: | | | | | | | | | | |
|----------------------|---|---|------------------------------|------------|--------|--|--|--|--|--|--|
| Accounting Period | 2020/2 | | | | | | | | | | |
| B | rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounts. | Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpote title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. | | | | | | | | | |
| | LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM | | | | | | | | | | |
| | Midcontinent Communications | | | | | | | | | | |
| | | | | 636 | 420202 | | | | | | |
| | | | | 6364 | 2020/2 | | | | | | |
| | PO Box 5040 Sioux Falls, SD 57117-5040 | | | | | | | | | | |
| С | INSTRUCTIONS: In line 1, give any business or trade names used to id names already appear in space B. In line 2, give the mailing address of | • | | | | | | | | | |
| System | 1 IDENTIFICATION OF CABLE SYSTEM: Grand Forks, ND | , , , , , , , , , , , , , , , , , , , | <u> </u> | <u> </u> | | | | | | | |
| | MAILING ADDRESS OF CABLE SYSTEM: PO Box 5040 (Number, street, rural route, apartment, or suite number) Sioux Falls, SD 57117-5040 (City, town, state, zip code) | | | | | | | | | | |
| D | Instructions: For complete space D instructions, see page 1b. Identify | only the frst comm | nunity served below and reli | st on page | 1b | | | | | | |
| Area | with all communities. | | | | | | | | | | |
| Served | CITY OR TOWN | STATE | | | | | | | | | |
| First Community | Grand Forks | ND | | | | | | | | | |
| | Below is a sample for reporting communities if you report multiple cha CITY OR TOWN (SAMPLE) | nnel line-ups in S _l | pace G. CH LINE UP | SLIB | GRP# | | | | | | |
| | Alda | MD | A A | 306 | 1 | | | | | | |
| Sample | Alliance | MD | В | | 2 | | | | | | |
| | Gering | MD | В | | 3 | | | | | | |

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

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 6364 **Midcontinent Communications** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN CH LINE UP SUB GRP# STATE **Grand Forks** ND AC 4 First Crookston MN AC 4 Community **East Grand Forks** MN AC 4 **Emerado** ND AC 4 **Grand Forks AFB** ND AC 4 Manvel ND AC 4 See instructions for Oslo MN AC 4 additional information on alphabetization. Larimore AC 5 ND Minto ND AA 2 Grafton ND AA Add rows as necessary. 3 **Buxton** ND AB Reynolds ND AB 3 **Thompson** ND AB 3 Hatton ND **AB** 3 Grandin ND AD 6 Hillsboro AD 6 ND Mayville ND AD 6 **Portland** ND **AD** 6

Name
Name
Midcontinent Communications

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

| BL | OCK 1 | | BLOCK 2 | | | | | |
|---|-------------|----|---------|---------------------|-------|-------------|----|-------|
| NO. OF | | | | | | NO. OF | | |
| CATEGORY OF SERVICE | SUBSCRIBERS | | RATE | CATEGORY OF SERVICE | | SUBSCRIBERS | | RATE |
| Residential: | | | | | | | | |
| Service to first set | 15,671 | \$ | 22.95 | High Def Converter | | 14,834 | \$ | 3.00 |
| Service to additional set(s) | | | | Hospitals | | 495 | \$ | 7.50 |
| FM radio (if separate rate) | | | | Nursing Homes | | 1,254 | \$ | 7.00 |
| Motel, hotel | 862 | \$ | 13.50 | Business Accounts | | 806 | \$ | 22.95 |
| Commercial | 2,989 | \$ | 72.95 | | | | | |
| Converter | | | | | | | | |
| Residential | 20,336 | \$ | 3.00 | | | | | |
| Non-residential | | | | | | | | |
| | | 1 | | | ••••• | | | |

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

| BLOCK 1 | | | | | | | BLOCK 2 | | |
|---|--|-------|-------------------------------|----|---------|--|--------------------------|-------|-------|
| CATEGORY OF SERVICE | ATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE | | | | | | CATEGORY OF SERVICE | I | RATE |
| Continuing Services: | | | Installation: Non-residential | | | | | | |
| Pay cable | \$ | 16.00 | Motel, hotel | \$ | 50.00 | | Digital 1 | \$ | 10.00 |
| Pay cable—add'l channel | | | Commercial | \$ | 50.00 | | Digital Variety | \$ | 3.50 |
| Fire protection | | | • Pay cable | | | | Digital Espanol | \$ | 4.00 |
| •Burglar protection | | | Pay cable-add'l channel | | | | Digital Sports & Variety | \$ | 9.00 |
| Installation: Residential | on: Residential • Fire protection | | Fire protection | | Cinemax | | \$ | 16.00 | |
| • First set | \$ | 50.00 | Burglar protection | | | | Showtime | \$ | 16.00 |
| Additional set(s) | \$ | 25.00 | Other services: | | | | Starz! & Encore | \$ | 16.00 |
| • FM radio (if separate rate) | | | Reconnect | \$ | 75.00 | | TMC | \$ | 16.00 |
| Converter | | | Disconnect | | | | | | |
| | | | Outlet relocation | \$ | 25.00 | | | | |
| | | | Move to new address | \$ | 25.00 | | | | |
| | | | | | | | | | |

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 6364 **Midcontinent Communications** PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if 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 Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is 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. CHANNEL LINE-UP AA 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION 1. CALL SIGN **CHANNEL** OF (Yes or No) **CARRIAGE** NUMBER STATION (If Distant) KCGE-DT Ε 16 Yes 0 CROOKSTON, MN (PBS) See instructions for KCGE-DT2 16.2 E-M Yes 0 CROOKSTON, MN (PBSWRLD/LF) additional information n alphabetization. KCGE-DT3 16.3 E-M Yes 0 CROOKSTON, MN(PBS MN HD) KCGE-DT4 16.4 E-M Yes 0 CROOKSTON, MN(PBS KIDS) KNRR-DT 12 ı No PEMBINA, ND (FOX) KNRR-DT2 12.2 I-M No **PEMBINA, ND (ANTENNA)** KRDK-DT 24 ı **VALLEY CITY, ND (COZI TV HD)** No **KVLY-DT** 36 Ν No FARGO, ND (NBC) **KVLY-DT2** FARGO, ND (CBS-KXJB) 36.2 N-M No **KVLY-DT3** I-M FARGO, ND (ME TV) 36.3 No **KXJB-LD2** I-M HORACE, ND (CW) 30.2 No KXJB-LD3 30.3 I-M HORACE, ND (HEROES) No WDAZ-DT 8 Ν No **DEVILS LAKE, ND (ABC)** WDAY-DT2 FARGO, ND (True Crime) 21.2 I-M No WDAY-DT3 I-M FARGO, ND (WDAY'Z XTRA HD) 21.3 No

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Midcontinent Communications

SYSTEM ID#
Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute 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.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

| | | CHANN | EL LINE-UP | AB | | | |
|-----------------|--------------------------------|--------------------------|----------------------------|---|------------------------------|--|--|
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
| KBRR-DT | 10 | | No | | THIEF RIVER FALLS, MN (FOX) | | |
| KBRR-DT2 | 10.2 | I-M | No | | THIEF RIVER FALLS,MN(ANTE) | | |
| KFME-DT | 13 | E | No | | FARGO, ND (PBS) | | |
| KFME-DT2 | 13.2 | E-M | No | | FARGO,ND(PBS WRLD/LIFE) | | |
| KFME-DT3 | 13.3 | E-M | No | | FARGO, ND (PBS MN HD) | | |
| KFME-DT4 | 13.4 | E-M | No | | FARGO, ND (PBS KIDS) | | |
| KRDK-DT | 24 | ı | No | | VALLEY CITY, ND (COZI TV HD) | | |
| KVLY-DT | 36 | N | No | | FARGO, ND (NBC) | | |
| KVLY-DT2 | 36.2 | N-M | No | | FARGO, ND (CBS-KXJB) | | |
| KVLY-DT3 | 36.3 | I-M | No | | FARGO, ND (ME TV) | | |
| KXJB-LD2 | 30.2 | I-M | No | | HORACE, ND (CW) | | |
| KXJB-LD3 | 30.3 | I-M | No | | HORACE, ND (HEROES) | | |
| WDAZ-DT | 8 | N | No | | DEVILS LAKE, ND (ABC) | | |
| WDAY-DT2 | 21.2 | I-M | No | | FARGO, ND (True Crime) | | |
| WDAY-DT3 | 21.3 | I-M | No | | FARGO, ND (WDAY'Z XTRA HD) | | |

G

Primary Transmitters: Television

| LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# | |
|--------------------------------------|------------|------|
| Midcontinent Communications | 6364 | Name |

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute 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.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

| | | CHANN | EL LINE-UP | AC | |
|-----------------|--------------------------------|--------------------------|----------------------------|---|------------------------------|
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION |
| KBRR-DT | 10 | I | No | | THIEF RIVER FALLS, MN (FOX) |
| KBRR-DT2 | 10.2 | I-M | No | | THIEF RIVER FALLS,MN(ANTE) |
| KCGE-DT | 16 | E | Yes | 0 | CROOKSTON, MN (PBS) |
| KCGE-DT2 | 16.2 | E-M | Yes | 0 | CROOKSTON,MN(PBSWRLD/LF |
| KCGE-DT3 | 16.3 | E-M | Yes | 0 | CROOKSTON,MN(PBS MN HD) |
| KCGE-DT4 | 16.4 | E-M | Yes | 0 | CROOKSTON,MN(PBS KIDS) |
| KRDK-DT | 24 | ı | No | | VALLEY CITY, ND (COZI TV HD) |
| KVLY-DT | 36 | N | No | | FARGO, ND (NBC) |
| KVLY-DT2 | 36.2 | N-M | No | | FARGO, ND (CBS-KXJB) |
| KVLY-DT3 | 36.3 | I-M | No | | FARGO, ND (ME TV) |
| KXJB-LD2 | 30.2 | I-M | No | | HORACE, ND (CW) |
| KXJB-LD3 | 30.3 | I-M | No | | HORACE, ND (HEROES) |
| WDAZ-DT | 8 | N | No | | DEVILS LAKE, ND (ABC) |
| WDAY-DT2 | 21.2 | I-M | No | | FARGO, ND (True Crime) |
| | 21.3 | I-M | No | | FARGO, ND (WDAY'Z XTRA HD) |

G

Primary Transmitters: Television

| LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# | |
|--------------------------------------|------------|------|
| Midcontinent Communications | 6364 | Name |

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute 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.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

| | | CHANN | EL LINE-UP | AD | |
|-----------------|--------------------------------|--------------------------|----------------------------|---|------------------------------|
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION |
| KBRR-DT | 10 | I | No | | THIEF RIVER FALLS, MN (FOX) |
| KBRR-DT2 | 10.2 | I-M | No | | THIEF RIVER FALLS,MN(ANTE) |
| KFME-DT | 13 | Е | No | | FARGO, ND (PBS) |
| KFME-DT2 | 13.2 | E-M | No | | FARGO,ND(PBS WRLD/LIFE) |
| KFME-DT3 | 13.3 | E-M | No | | FARGO, ND (PBS MN HD) |
| KFME-DT4 | 13.4 | E-M | No | | FARGO, ND (PBS KIDS) |
| KRDK-DT | 24 | I | No | | VALLEY CITY, ND (COZI TV HD) |
| KVLY-DT | 36 | N | No | | FARGO, ND (NBC) |
| KVLY-DT2 | 36.2 | N-M | No | | FARGO, ND (CBS-KXJB) |
| KVLY-DT3 | 36.3 | I-M | No | | FARGO, ND (ME TV) |
| KXJB-LD2 | 30.2 | I-M | No | | HORACE, ND (CW) |
| KXJB-LD3 | 30.3 | I-M | No | | HORACE, ND (HEROES) |
| WDAY-DT | 21 | N | No | | FARGO, ND (ABC) |
| WDAY-DT2 | 21.2 | I-M | No | | FARGO, ND (True Crime) |
| | 21.3 | I-M | No | | FARGO, ND (WDAY'Z XTRA HD) |

G

Primary Transmitters: Television

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 6364 **Midcontinent Communications** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

| TOTAL OLD STATE | | | | | | | |
|---|-----------------------|------------------------------------|---|---------------------|--------------------------------|---------------|--------------------------|
| LEGAL NAME OF OWNER OF Midcontinent Commun | | EM: | | | S | 6364 | Name |
| SUBSTITUTE CARRIAGE | E: SPECIA | L STATEMEN | NT AND PROGRAM LOG | ì | | | • |
| In General: In space I, ident substitute basis during the acepplanation of the programm | ccounting pe | eriod, under spe | ecific present and former FC | C rules, regu | lations, or authorizations. | For a further | I Substitute |
| 1. SPECIAL STATEMENT | CONCER | NING SUBST | TITUTE CARRIAGE | | | | Carriage: |
| During the accounting per | - | ır cable system | carry, on a substitute bas | s, any nonne | <u></u> | | Special Statement and |
| broadcast by a distant stat | | root of this nos | ro blank If your answer is | 'Voo." vou m | | ⊠No | Program Log |
| Note: If your answer is "No" log in block 2. | , leave trie | rest of this pag | ge blank. Il your answer is | res, you iii | ust complete the program | 1 | |
| 2. LOG OF SUBSTITUTE | | | to line. I lee abbreviations | | acible if their meaning in | | |
| In General: List each subst clear. If you need more spa | | | | wnerever po | ssible, if their meaning is | | |
| Column 1: Give the title period, was broadcast by a | | | ision program (substitute p | | | ion | |
| under certain FCC rules, re | gulations, o | or authorization | s. See page (vi) of the gen | eral instructi | ons located in the paper | IOH | |
| SA3 form for futher informa titles, for example, "I Love L | tion. Do no | ot use general o RA Baskethall: | categories like "movies", or 76ers vs. Bulls " | "basketball" | . List specific program | | |
| Column 2: If the progran | n was broad | dcast live, ente | r "Yes." Otherwise enter "N | | | | |
| | | | asting the substitute progra ne community to which the | | ensed by the FCC or, in | | |
| the case of Mexican or Can | | | community with which the tem carried the substitute p | | | th | |
| first. Example: for May 7 giv | /e "5/7." | | | - | | | |
| Column 6: State the time to the nearest five minutes. | | | gram was carried by your or ed by a system from 6:01: | | | У | |
| stated as "6:00-6:30 p.m." | • | | , , | · | • | | |
| to delete under FCC rules a | | | was substituted for progra | | | 1 | |
| gram was substituted for pr | ogramming | | | | | | |
| effect on October 19, 1976. | | | | | | | |
| s | UBSTITUT | E PROGRAM | I | l I | EN SUBSTITUTE HAGE OCCURRED | 7. REASON | |
| TITLE OF PROGRAM | 2. LIVE? Yes or No | 3. STATION'S CALL SIGN | 4. STATION'S LOCATION | 5. MONTH AND DAY | 6. TIMES FROM — TO | FOR DELETION | |
| | 7 22 21 112 | | | | _ | | |
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ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 6.

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|--|---|---|---|---|---|---|--|---|------|------------|--|--|--|--|
| Name | | OWNER OF CABLE | | | | | | | S | 4364 YSTEM | | | | |
| J Part-Time Carriage Log | time carriage du hours your syste Column 1 (C column 5 of spa Column 2 (D curred during th Give the mont "4/10." • State the start television statio "app." Example | s space ties in value to lack of actiem carried that sall sign): Give sales and hours the accounting perhand day when sing and ending the special sales are decembered. | vated channel capa station. If you need the call sign of every s of carriage): For earlod. the carriage occurrent times of carriage to ay, you may give an | city, you are req more space, plead distant station when the station, list each station, list ed. Use numeral the nearest quar approximate en | uired ase a whose the d s, w ter h ding | I to complete this attach additional se basis of carriadates and hours with the month firstour. In any case hour, followed be | s log giving the pages. ge you identifie when part-time of the Example: for where carriage y the abbreviati | ou identified by "LAC" in part-time carriage oc- ample: for April 10 give re carriage ran to the end of the abbreviation | | | | | | |
| | | | DATES | S AND HOURS (| OF F | PART-TIME CAR | RIAGE | | | | | | | |
| | CALL SIGN | WHEN | N CARRIAGE OCCL | JRRED | | CALL SIGN | WHE | N CARRIAGE O | CCUF | RRED | | | | |
| | CALL SIGN | DATE | HOUF FROM | RS TO | | CALL SIGN | DATE | H FROM | OURS | S TO | | | | |
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| | L NAME OF OWNER OF CABLE SYSTEM: Icontinent Communications | | | SYSTEM ID# 6364 | Name | | | | | |
|---|--|-------------------------|--|--------------------|---|--|--|--|--|--|
| Inst all a (as i page | COSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's second dentifed in space E) during the accounting period. For a further explanation of how to cole (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. | ndary trar ompute th | nsmissionis amou | n service | K Gross Receipts | | | | | |
| COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of | | | | | | | | | | |
| ▶ If pa 3 be ▶ If pa | k 3 below. Int 6 of the DSE schedule was completed, the amount from line 7 of block C should be en- elow. Int 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shou- block 4 below. | | | | | | | | | |
| Block 1 | Block MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at | | | | | | | | | |
| Block 2 | This is your minimum fee. 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 column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting perion X Yes—Complete the DSE schedule. | n 4, you r d? | nust ch | eck | | | | | | |
| Block 3 | Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero | _ | \$ | 3,039.91 | | | | | | |
| | Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero | _ | | 0.00 | | | | | | |
| | Line 3. Add lines 1 and 2 and enter here | \$ | | 3,039.91 | | | | | | |
| Block 4 | Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter | - | \$ | 41,170.17 | Cable systems submitting additional | | | | | |
| | zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet) | 0.00 | deposits under Section 111(d)(7) should contact the Licensing | | | | | | | |
| | Line 4. FILING FEE | | | | | | | | | |
| | TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here | \$ | | 41,895.17 | appropriate form for submitting the additional fees. | | | | | |
| | Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form for more information.) | See page | (i) of the | e | | | | | | |

| | | FURM SA3E, PAGE 8. | | | | | | | | | |
|--|---|-----------------------|--|--|--|--|--|--|--|--|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: Midcontinent Communications | SYSTEM ID# 6364 | | | | | | | | | |
| M Channels | 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 | | | | | | | | | | |
| | | | | | | | | | | | |
| | Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services | 383 | | | | | | | | | |
| N Individual to | INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.) | | | | | | | | | | |
| Be Contacted for Further Information | Name Wynne Haakenstad Telephone | 952-844-2622 | | | | | | | | | |
| | Address 3600 Minnesota Drive, STE 700 (Number, street, rural route, apartment, or suite number) | | | | | | | | | | |
| | Edina, MN 55435 (City, town, state, zip) | | | | | | | | | | |
| | Email wynne.haakenstad@midco.com Fax (optional) | | | | | | | | | | |
| 0 | CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regular | ations.) | | | | | | | | | |
| Certifcation | I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) | | | | | | | | | | |
| | (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; | or | | | | | | | | | |
| | (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sys in line 1 of space B and that the owner is not a corporation or partnership; or | stem as identified | | | | | | | | | |
| | (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner in line 1 of space B. | r of the cable system | | | | | | | | | |
| | I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained he are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] | erein | | | | | | | | | |
| | X /s/ Wynne Haakenstad | | | | | | | | | | |
| | Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compated. | | | | | | | | | | |
| | Typed or printed name: Wynne Haakenstad | | | | | | | | | | |
| | Title: Director of Programming (Title of official position held in corporation or partnership) | | | | | | | | | | |
| | Date: February 22, 2021 | | | | | | | | | | |

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

| LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# | Nama |
|---|---|---|
| Midcontinent Communications | 6364 | Name |
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system secribers and amounts collected from subscribers receiving secondary transmissions pursuant. For more information on when to exclude these amounts, see the note on page (vii) of the general in paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for second made by satellite carriers to satellite dish owners? X NO | em for the basic nall not include sub- to section 119." | Special Statement Concerning Gross Receipts Exclusion |
| YES. Enter the total here and list the satellite carrier(s) below | | |
| Name Mailing Address Mailing Address | | |
| INTEREST ASSESSMENTS | | |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA: | . , | Q |
| Line 1 Enter the amount of late payment or underpayment | | Interest Assessment |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here | - days | |
| Line 3 Multiply line 2 by the number of days late and enter the sum here | x 0.00274 | |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7) | (interest charge) | |
| * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For furthe contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. | | |
| ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. | | |
| NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copy please list below the owner, address, first community served, accounting period, and ID number as gilling. | • | |
| Owner Address | | |
| First community served Accounting period ID number | | |
| | | |

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

ACCOUNTING PERIOD: 2020/2
DSE SCHEDULE, PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

SCHEDULE

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

- · If any of the stations were partially distant:
- 1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.
- 2. Identify the communities/areas represented by each subscriber group.
- 3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

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

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

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

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

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

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

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

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

EXAMPLE:

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

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

| | 1 , | TC Mi |
|--------------|----------------------------------|----------|
| Santa Rosa | Stations A and C 35 mile zone | |
| | l'、 / | Fir |
| | `~-/ | (Sa |
| | Fairvale | Gr |
| Rapid City | | DS |
| | | Ва |
| | Bodega | \$3 |
| | Bay | \$3 |
| / | | Ва |
| Station | ns B. D. | _ |
| an | | To |
| 35 mil | e zone | In |
| ` ~ | | 1 |

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

| linimum Fee Total Gross Receipts | \$600,000.00 |
|----------------------------------|--------------|
| | x .01064 |
| | \$6.384.00 |

| | | \$0,304.00 | | | |
|------------------------------|--------------|-----------------------------|--------------|-----------------------------|--------------|
| First Subscriber Group | | Second Subscriber Group | | Third Subscriber Group | |
| (Santa Rosa) | | (Rapid City and Bodega Bay) | | (Fairvale) | |
| Gross receipts | \$310,000.00 | Gross receipts | \$170,000.00 | Gross receipts | \$120,000.00 |
| DSEs | 2.472 | DSEs | 1.083 | DSEs | 1.389 |
| Base rate fee | \$6,497.20 | Base rate fee | \$1,907.71 | Base rate fee | \$1,604.03 |
| \$310,000 x .01064 x 1.0 = | 3,298.40 | \$170,000 x .01064 x 1.0 = | 1,808.80 | \$120,000 x .01064 x 1.0 = | 1,276.80 |
| \$310,000 x .00701 x 1.472 = | 3,198.80 | \$170,000 x .00701 x .083 = | 98.91 | \$120,000 x .00701 x .389 = | 327.23 |
| Base rate fee | \$6,497.20 | Base rate fee | \$1,907.71 | Base rate fee | \$1,604.03 |

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

ACCOUNTING PERIOD: 2020/2

| DSE SCHEDULE. PAGI | E 11. (CONTINUED) | | | | | | | | | | | | |
|----------------------|--|-----------------------|---------------------------------|--------------------|--------------------------|-------|--|--|--|--|--|--|--|
| 4 | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID: | | | | | | | | | | | | |
| ' | Midcontinent Communications | | | | | | | | | | | | |
| | SUM OF DSEs OF CATEGORY "O" STATIONS: | | | | | | | | | | | | |
| | Add the DSEs of each static | | | | | | | | | | | | |
| | Enter the sum here and in line | e 1 of part 5 of this | schedule. | | 1.00 | | | | | | | | |
| | Instructions: | | | | | ı | | | | | | | |
| 2 | In the column headed "Call | Sign": list the cal | I signs of all distant stations | s identified by th | e letter "O" in column 5 | | | | | | | | |
| | | | | | | | | | | | | | |
| | of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- | | | | | | | | | | | | |
| of DSEs for | mercial educational station, give the DSE as ".25." CATEGORY "O" STATIONS: DSEs | | | | | | | | | | | | |
| Category "O" | CALL SIGN | DOE | | | CALL CICN | l per | | | | | | | |
| Stations | KCGE-DT | DSE | CALL SIGN | DSE | CALL SIGN KCGE-DT3 | DSE | | | | | | | |
| | I | 0.250 | KCGE-DT2 | 0.250 | NCGE-D13 | 0.250 | | | | | | | |
| | KCGE-DT4 | 0.250 | | | | | | | | | | | |
| | | | | <mark></mark> | | | | | | | | | |
| | | | | | | | | | | | | | |
| Add rows as | | | | | | | | | | | | | |
| necessary. | | | | | | | | | | | | | |
| Remember to copy all | | | | | | | | | | | | | |
| formula into new | | | | | | | | | | | | | |
| rows. | | | | | | | | | | | | | |
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| Name | | owner of cable system: It Communications | | | | | \$ | SYSTEM ID# 6364 |
|---|--|--|---|--|---|--|---|--------------------|
| Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel | Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6 | capacity st the call sign of all distar for each station, give the correspond with the inform for each station, give the Divide the figure in coluit at least to the third deciminate of the column of | ne number of he mation given in the total number mn 2 by the figural point. This tation, give the fumn 4 by the f | nours your cable system is space J. Calculate on it of hours that the static gure in column 3, and gist the "basis of carriage e "type-value" as "1.0." | n carried the stati ly one DSE for each on broadcast ove ive the result in do e value" for the st For each network | on during the accounting ach station. If the air during the accounting decimals in column 4. This ation. It or noncommercial education of the column 6. Round to no le | nting period. Ifigure must ational station, | |
| Capacity | | (| CATEGORY | / LAC STATIONS: | COMPUTATI | ON OF DSEs | | |
| | 1. CALL SIGN | 2. NUMBE OF HOU CARRIE SYSTEM | R JRS ED BY | 3. NUMBER OF HOURS STATION ON AIR | 4. BASIS OF CARRIAG VALUE | 5. TYPE | 6. DS | šΕ |
| | | | ÷ | | = | x | = | |
| | | | ÷ | | _ | X | = | |
| | | | - + | | = | x x | = | |
| | | | ÷ | | = | x | = | |
| | | | ÷ | | | x | = | |
| | | | ÷ | | = | x x | = | |
| | Add the DSEs Enter the su | s OF CATEGORY LAC ST of each station. um here and in line 2 of pa | | nedule, | | 0.00 | | |
| Computation of DSEs for Substitute-Basis Stations | Was carried tions in efferations in efferations in efferations and the space I). Column 2: at your option. Column 3: Column 4: | re the call sign of each start by your system in substituted on October 19, 1976 (a one or more live, nonnetwork of the cach station give the This figure should correst Enter the number of days Divide the figure in colum This is the station's DSE (| tution for a proas shown by the programs du number of live pond with the in the calendan 2 by the figu | gram that your system ne letter "P" in column 7 uring that optional carrie , nonnetwork programs information in space I. Ir year: 365, except in a re in column 3, and giv | was permitted to of space I); and age (as shown by the carried in substi- a leap year. the the result in col | delete under FCC rules a the word "Yes" in column 2 of tution for programs that w umn 4. Round to no less | of rere deleted than the third | n). |
| | | SU | JBSTITUTE | -BASIS STATION | S: COMPUTA | ATION OF DSEs | | |
| | 1. CALL SIGN | 2. NUMBER OF PROGRAMS | 3. NUMBE OF DAY IN YEAI | rs | 1. CALL SIGN | 2. NUMBER OF PROGRAMS | 3. NUMBER OF DAYS IN YEAR | 4. DSE |
| | | <u> </u> | | | | <u> </u> | | = |
| | | ÷ | | = | | ÷ | | = |
| | | ÷ | | = | | ÷ | | = |
| | | ÷ | | = | | ÷ | | = |
| | Add the DSEs | ÷ s OF SUBSTITUTE-BASIS of each station. um here and in line 3 of pa | S STATIONS: | edule, | | 0.00 |] | = |
| 5 | | ER OF DSEs: Give the amo | | boxes in parts 2, 3, and | 4 of this schedule | and add them to provide the | ne total | |
| Total Number | 1. Number | of DSEs from part 2 ● | | | | > | 1.00 | |
| of DSEs | | of DSEs from part 3 ● | | | | > | 0.00 | |
| | 3. Number | of DSEs from part 4 ● | | | | > | 0.00 | |
| | TOTAL NUMBE | ER OF DSEs | | | | | | 1.00 |

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

| LEGAL NAME OF O | | | | | | | S | YSTEM ID# 6364 | Name |
|---|--------------------------------------|-------------------------------|-------------------------------------|---|----------------|-----------------|-----------------------|-------------------|--|
| | | | | | | | | 3334 | |
| nstructions: Bloc n block A: | k A must be comp | leted. | | | | | | | 6 |
| • If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule. | | | | | | | | | |
| schedule. • If your answer if "No," complete blocks B and C below. | | | | | | | | | 0 |
| | | | | TELEVISION MA | | | | | Computation of 3.75 Fee |
| effect on June 24, | 1981? | | • | er markets as defin | | | C rules and regula | tions in | |
| | lete blocks B and (| | S NOT COM | LETE THE NEWAIN | IDEN OF TAI | KI OAND I. | | | |
| | | BI O | CK B: CARE | RIAGE OF PERM | /ITTED DS | iFs | | | |
| Column 1: | List the call signs | | | part 2, 3, and 4 of th | | | n was permitted to | carry under | |
| CALL SIGN | FCC rules and re | gulations pric e DSE Sched | or to June 25, 1 Iule. (Note: Th | 981. For further expelled the second | planation of p | ermitted statio | ns, see the | j | |
| Column 2: BASIS OF PERMITTED CARRIAGE | (Note the FCC ru | les and regul | ations cited be | is on which you car low pertain to those ket quota rules [76. | in effect on | June 24, 1981. | • | | |
| | C Noncommerica | al educationa | station [76.59 | 6.59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subs | (a) referring | to 76.61(d)] | | | |
| | instructions for E Carried pursua | ant to individu | al waiver of F0 | | | | | | |
| | G Commercial U | HF station wi | thin grade-B c | e or substitute basis ontour, [76.59(d)(5) | | | ring to 76.61(e)(5)] | | |
| | M Retransmissio | on of a distant | multicast strea | am. | | | | | |
| Column 3: | | e stations ider | ntified by the le | parts 2, 3, and 4 of tter "F" in column 2, | | | ksheet on page 14 | of | |
| 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | |
| KCGE-DT | | 0.25 | | | | | | | |
| KCGE-DT2 | C M | 0.25 0.25 | | | | | | | |
| KCGE-DT3 | M | 0.25 | | | | | | | |
| KCGE-DT4 | M | 0.25 | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | 1.00 | |
| | | E | BLOCK C: CC | MPUTATION OF | 3.75 FEE | | | | |
| ine 1: Enter the | total number of [| DSEs from p | art 5 of this s | chedule | | | | | |
| ine 2: Enter the | sum of permitted | d DSEs from | block B abo | ve | | | | | |
| | | | | of DSEs subject to of this schedule) | | ate. | | | |
| ine 4: Enter gro | ss receipts from | space K (pa | ge 7) | | | | | 275 | Do any of the DSEs represent |
| ing E. Maile C. C. | a 4 h 0 0075 | mal a t - | a bar- | | | | x 0.03 | 010 | partially permited/ |
| ine 5: Multiply III | ne 4 by 0.0375 a | na enter sur | n nere | | | | х | | partially nonpermitted carriage? |
| .ine 6: Enter tota | I number of DSE | Es from line 3 | 3 | | | | | | If yes, see part 9 instructions. |
| ine 7: Multiply lin | ne 6 by line 5 and | d enter here | and on line 2 | , block 3, space L | . (page 7) | | | 0.00 | |

| Name | YSTEM ID# 6364 | | | | | | | WNER OF CABLE S Communication | | | |
|----------------------|---|-----------------------|-----------------|--------|-----------------------|-----------------|--------|-------------------------------|-----------------|--|--|
| | BLOCK A: TELEVISION MARKETS (CONTINUED) | | | | | | | | | | |
| 6 | 3. DSE | 2. PERMITTED BASIS | 1. CALL SIGN | 3. DSE | 2. PERMITTED BASIS | 1. CALL SIGN | 3. DSE | 2. PERMITTED BASIS | 1. CALL SIGN | | |
| Computation 3.75 Fee | | | | | | | | | | | |
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ACCOUNTING PERIOD: 2020/2

| Name | Midcontinent C | er of Cable System: ommunications | | | | SYSTEM ID# | | | | | |
|---|--|---|---|---|------------------------------|---------------------|--|--|--|--|--|
| Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage | Computating the DSE Schedule for Permitted Part-Time and Substitute Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections | | | | | | | | | | |
| 1 | | | | | | · | | | | | |
| | 1. CALL SIGN | 2. PRIOR DSE | 3. ACCOUNTING PERIOD | 4. BASIS OF CARRIAGE | 5. PRESENT DSE | 6. PERMITTED DSE | | | | | |
| ı | SIGN | DSE | PERIOD | CARRIAGE | DSE | DSE | | | | | |
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| 7 Computation of the | Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. | | | | | | | | | | |
| Syndicated | BLOCK A: MAJOR TELEVISION MARKET | | | | | | | | | | |
| Exclusivity Surcharge | • Is any portion of the c | able system within a tor | o 100 major television mark | et as defned by section 76 | 5 of ECC rules in effect Jul | ne 24 1981? | | | | | |
| Curcharge | l — '' | blocks B and C . | Too major tolevision mark | et as defned by section 76.5 of FCC rules in effect June 24, 1981? X No—Proceed to part 8 | | | | | | | |
| | BLOCK B: C | arriage of VHF/Grade E | 3 Contour Stations | BLOCK | C: Computation of Exem | int DSFs | | | | | |
| | Is any station listed in commercial VHF station or in part, over the cal | block B of part 6 the pronthat places a grade l | rimary stream of a B contour, in whole | BLOCK C: Computation of Exempt DSEs Was any station listed in block B of part 7 carried in any community served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE | | | | | | | |
| | | nd proceed to part 8. | | | nd proceed to part 8. | | | | | | |
| | CALL SIGN | DSE CAL | L SIGN DSE | CALL SIGN | DSE CALL SIG | GN DSE | | | | | |
| | | | | | | | | | | | |
| | | TOTA | AL DSEs 0.00 | | TOTAL DS | SEs 0.00 | | | | | |
| | | 1017 | | | LIGIALDO | 0.00 | | | | | |

| LEGAL NA | ME OF OWNER OF CABLE SYSTEM: Midcontinent Communications | SYSTEM ID# 6364 | Name |
|---------------|--|--------------------|-------------------------------------|
| | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE | | |
| Section 1 | Enter the amount of gross receipts from space K (page 7) | 3,869,376.42 | 7 |
| Section 2 | A. Enter the total DSEs from block B of part 7 | 0.00 | Computation |
| | B. Enter the total number of exempt DSEs from block C of part 7 | 0.00 | of the Syndicated Exclusivity |
| | C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8. | 0.00 | Surcharge |
| • Is an | y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. | | |
| | 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 DSI | Ē | |
| | is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. A. Enter 0.00599 of gross receipts (the amount in section1) | | |
| | B. Enter 0.00377 of gross receipts (the amount in section 1) | | |
| | C. Subtract 1.000 from total permitted DSEs (the figure on | | |
| | line C in section 2) and enter here | | |
| | D. Multiply line B by line C and enter here | | |
| | E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | | |
| Section 3b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank. | | |
| | A. Enter 0.00599 of gross receipts (the amount in section 1) | | |
| | B. Enter 0.00377 of gross receipts (the amount in section 1) | | |
| | C. Multiply line B by 3.000 and enter here | | |
| | D. Enter 0.00178 of gross receipts (the amount in section 1) | | |
| | E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here | | |
| | F. Multiply line D by line E and enter here | | |
| | G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | | |
| | SECTION 4: SECOND 50 TELEVISION MARKET | | |
| | Did your cable system retransmit the signals of any partially distant television stations during the accounting period? | | |
| Section 4a | X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. | | |
| | If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSI 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) | E | |
| | B. Enter 0.00189 of gross receipts (the amount in section 1) | | |
| | C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here | | |
| | D. Multiply line B by line C and enter here | | |
| | E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | | |

| Name | | ME OF OWNER OF CABLE SYSTEM: Midcontinent Communications | STEM ID# 6364 |
|---|---|--|------------------|
| Computation of the Syndicated Exclusivity Surcharge | Section 4b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. F. Multiply line D by line E and enter here G. Add lines A, C, and F. This is your surcharge. | - |
| | | Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge | <u></u> |
| 8 Computation of Base Rate Fee | You m 6 was In blo If you If you blank What i | ctions: Just 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. Jock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. Just answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. Just answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below to. Just a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers cocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions. | |
| | | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS | |
| | _ | rour cable system retransmit the signals of any partially distant television stations during the accounting period? | |
| | | X Yes—Complete part 9 of this schedule. No—Complete the following sections. | |
| | Section | BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE | |
| | 1 | Enter the amount of gross receipts from space K (page 7) | _ |
| | Section 2 | Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) | _ |
| | Section 3 | If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. | |
| | | A. Enter 0.01064 of gross receipts (the amount in section 1) | _ |
| | | B. Enter 0.00701 of gross receipts (the amount in section 1) | |
| | | C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here | |
| | | D. Multiply line B by line C and enter here ▶ _ | _ |
| | | E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) | 6.5. |
| | | Base Rate Fee | 0.00 |

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

| | AME OF OWNER OF CABLE SYSTEM: Ontinent Communications | SYSTEM ID# 6364 | Name |
|-------------------|--|--------------------|--|
| Section 4 | If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank. | | _ |
| 4 | A. Enter 0.01064 of gross receipts (the amount in section 1) | | 8 |
| | B. Enter 0.00701 of gross receipts (the amount in section 1) \$ | | Computation of Base Rate Fee |
| | C. Multiply line B by 3.000 and enter here | _ | Dase Rate Fee |
| | D. Enter 0.00330 of gross receipts (the amount in section 1) **Description** **Descripti | | |
| | E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here | | |
| | F. Multiply line D by line E and enter here \$ | | |
| | G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$ | 0.00 | |
| IMPOR | TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca | ast signals shall | |
| | be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple chann | | 9 |
| receipt | eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee s from subscribers located within the station's local service area, from your system's total gross receipts. To take a | · | Computation of |
| exclusi | on, you must: | | Base Rate Fee |
| station DSEs a | Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system. | the number of | Syndicated Exclusivity Surcharge |
| NOTE: | If any portion of your cable system is located within the top 100 television market and the station is not exempt in mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B b cable system is wholly located outside all major television markets, complete block A only. | | for Partially Distant Stations, and |
| | Identify a Subscriber Group for Partially Distant Stations | | for Partially Permitted |
| - | For each community served, determine the local service area of each wholly distant and each partially distant state to that community. | ation you | Stations |
| outside | For each wholly distant and each partially distant station you carried, determine which of your subscribers were let the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.) | | |
| subscr | Divide your subscribers into subscriber groups according to the complement of stations to which they are distant ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide. | | |
| Compi | uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sys | tem's subscriber | |
| | section: | | |
| • Give | fy 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 a bers in the group. | ıll of the | |
| • If: | | | |
| , - | system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it s schedule; or, | in parts 2, 3, and | |
| , . | portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in 6 of this schedule. | block B, | |
| • Add t | ne 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 paper SA3 form. | instructions | |
| page. DSEs f | oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the for that group's complement of stations and total gross receipts from the subscribers in that group). You do not ne calculations on the form. | nat is, the total | |

| Nama | LEGAL NAME OF OWNER OF CABLE SYSTEM: | TEM ID# |
|------|--|---------|
| Name | Midcontinent Communications | 6364 |
| | Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals | |
| | Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and | |
| | partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these | |
| | subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant | |
| | signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by | |
| | .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported | |
| | for each part 9 used in steps 1 and 2 must equal the amount reported in space K. | |
| | Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant | |
| | signals from step 1 that is subject to this surcharge. | |
| | Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams | |
| | Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from | |
| | a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate | |
| | and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. | |
| | You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement | |
| | entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter. | |
| | transmitter of all association representing the primary transmitter. | |
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| | | | | | | | | Base Rate |
| | | | | KCGE-DT | 0.25 | | | and |
| | | | | KCGE-DT2 | 0.25 | | | Syndicat |
| | | | | KCGE-DT3 | 0.25 | | | Exclusiv |
| | | | | KCGE-DT4 | 0.25 | | | Surchar |
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| Total DSEs | • | ' | 0.00 | Total DSEs | | | 1.00 | |
| Gross Receipts First G | roup | \$ 3 | 31,022.48 | Gross Receipts Sec | ond Group | \$ | 232,969.00 | |
| | | | | | | | | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 2,478.79 | |
| | THIRD | SUBSCRIBER GRO | UP | | FOURTH | SUBSCRIBER GRO | UP | |
| COMMUNITY/ AREA | Buxton | l | | COMMUNITY/ ARE | A Grand Fo | orks | | |
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| otal DSEs | | Ш | 0.00 | Total DSEs | | | 0.00 | |
| | | | | | -4- 0 | • | - | |
| Gross Receipts Third C | σουρ | \$ 5 | 06,588.64 | Gross Receipts Fou | ırın Group | \$ 3, | 252,766.17 | |
| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
| | | | | Ш | | | | |
| Base Rate Fee: Add th | | e fees for each subso pace L (page 7) | criber group a | s shown in the boxes | above. | | 3,039.91 | |

| Name | SYSTEM ID# 6364 | | | | | | municati | |
|------------------|---------------------|--------------------|-------------------|---|--------------------|-----------------|----------------|--|
| | | BER GROUP | SUBSCRI | TE FEES FOR EACH | BASE RA | COMPUTATION OI | BLOCK A: | E |
| _ | JP | SUBSCRIBER GROU | SIXTH | | IP | SUBSCRIBER GROU | FIFTH | |
| 9 Computation | 1 | | Grandin | COMMUNITY/ AREA | | re | Larimor | COMMUNITY/ AREA |
| of | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN |
| Base Rate F | | | | | | | | |
| and | | - | | | | | 0.25 | KCGE-DT |
| Syndicated | | | | | | | 0.25 | KCGE-DT2 |
| Exclusivity | | | | | | | 0.25 | KCGE-DT3 |
| Surcharge | | | | | | | 0.25 | KCGE-DT4 |
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| | 0.00 | | | Total DSEs | 1.00 | | | Total DSEs |
| | | | | | ,736.71 | . 52 | | Oraca Dagainta First Or |
| | 203,293.42 | \$ 2 | d Group | Gross Receipts Secon | ,730.71 | \$ 52 | oup | 31088 Receipts First Gr |
| | | \$ 2 | | Gross Receipts Secon Base Rate Fee Secon | 561.12 | \$ | | |
| | 0.00 | | d Group | | 561.12 | | oup | Base Rate Fee First Gr |
| | 0.00 | \$ | d Group | | 561.12 | \$ | oup | Base Rate Fee First Gr |
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| | 0.00 JP DSE 0.00 | SUBSCRIBER GROU | DSE | Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN Total DSEs | 0 DSE | SUBSCRIBER GROU | DSE | COMMUNITY/ AREA CALL SIGN Total DSEs |
| | 0.00 JP DSE | \$ SUBSCRIBER GROU | DSE | Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN | 561.12 DP O DSE | SUBSCRIBER GROU | DSE | Base Rate Fee First Gr |

Nonpermitted 3.75 Stations

| LEGAL NAME OF OWNE Midcontinent Com | | | - | | | \$ | SYSTEM ID# 6364 | Name |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | roup | \$ 3 | 1,022.48 | Gross Receipts Secon | nd Group | \$ | 232,969.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
| | THIRD | SUBSCRIBER GRO | UP | | FOURTH | SUBSCRIBER GROU | JP | |
| COMMUNITY/ AREA | Buxton | 1 | | COMMUNITY/ AREA | Grand I | orks | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third C | Group | ş 9 | 6,588.64 | Gross Receipts Fourth | n Group | \$ 3,2 | 252,766.17 | |
| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Fourth | n Group | \$ | 0.00 | |
| Base Rate Fee: Add th | ne base rat | e fees for each subs | criber group a | II is shown in the boxes al | bove. | | | |
| Enter here and in block | | | | | | \$ | 0.00 | |

Nonpermitted 3.75 Stations

| | 6364 | | | | | | R OF CABLE municati | Midcontinent Com |
|---|------------|-----------------|---------|----------------------------------|---------|-----------------|-------------------------------|-----------------------------------|
| | | BER GROUP | SUBSCRI | TE FEES FOR EACH | BASE RA | COMPUTATION OF | BLOCK A: | |
| 9 Computation | JP | SUBSCRIBER GROU | SIXTH | | JP | SUBSCRIBER GROU | FIFTH | |
| | | 1 | Grandin | COMMUNITY/ AREA | | re | Larimo | COMMUNITY/ AREA |
| of | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN |
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| | 0.00 | | | Total DSEs | 0.00 | | | Total DSEs |
| | 203,293.42 | \$ 2 | d Group | Gross Receipts Second | ,736.71 | \$ 52 | oup | Gross Receipts First Gr |
| | 0.00 | \$ | d Group | Base Rate Fee Second | 0.00 | \$ | oup | 3ase Rate Fee First Gr |
| | JP | SUBSCRIBER GROU | EIGHTH | | JP | SUBSCRIBER GROU | SEVENTH | |
| | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
| | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN |
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| | 0.00 | | | Total DSEs | 0.00 | | | Fotal DSEs |
| | 0.00 | \$ | | Total DSEs Gross Receipts Fourth | 0.00 | \$ | roup | Total DSEs Gross Receipts Third G |

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Midcontinent Communications** 6364 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also 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 Second 50 major television market First 50 major television market of INSTRUCTIONS: **Base Rate Fee** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Exclusivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown