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					
2-28-22	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:									
Accounting Period	2021/2									
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.									
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM									
	MCC Iowa, LLC (Fort Dodge, IA)									
				01547420212						
				015474 2021/2						
	ONE MEDIACOM WAY									
	MEDIACOM PARK, NY 10918									
С	INSTRUCTIONS: In line 1, give any business or trade names used to ic									
C	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address giver	ı in space B.						
System	1 IDENTIFICATION OF CABLE SYSTEM:									
	MAILING ADDRESS OF CABLE SYSTEM:									
	2 (Number, street, rural route, apartment, or suite number)									
	(City, town, state, zip code)									
D	Instructions: For complete space D instructions, see page 1b. Identify	only the fret comm	nunity convod bolow and roli	et en nage 1h						
Area	with all communities.	only the fist confit	iurilly served below and reli	st on page 1b						
Served	CITY OR TOWN	STATE		_						
First	Fort Dodge	IA								
Community	Below is a sample for reporting communities if you report multiple cha	lnnel line-ups in S	pace G.							
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#						
Sample	Alda	MD	A	1						
Campio	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.

ACCOUNTING PERIOD: 2021/2 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 015474 MCC Iowa, LLC (Fort Dodge, IA) Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. 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. CH LINE UP SUB GRP# CITY OR TOWN STATE **Fort Dodge** IA AC 2 **First Lake City** IA AA 1 Community **Dakota City** IA AB **Humboldt City** IA AB 2 Barnum IA AC 2 **Calhoun County** IA AA 1 See instructions for **Webster City** IA AC 2 additional information on alphabetization. Webster County (outstide of Fort Dodge) IA AC 2 2 Laurens IA AB **Pocahontas** IΑ AB 2 **Belmond** IA AC Add rows as necessary. **Wright County** IA AC 2 Clarion IA AC Manson IA AA 1 **Rockwell City** IA AA 1 Hamilton County(Outside of Webster City) IA AC 2 Laurens (Unincorporated) IA AB 2 Pocahontas (Unincorporated) IΑ AB 2 **North Twin Lakes** IA AA 1

	·····	

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

MCC lowa, LLC (Fort Dodge, IA)

SYSTEM ID# 015474

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 	4,609	29.95-51.54				
 Service to additional set(s) 						
 FM radio (if separate rate) 						
Motel, hotel						
Commercial	2	29.95-51.54				
Converter						
Residential						
Non-residential						
		1			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 2			
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE RATE
Continuing Services:		Installation: Non-residential		
Pay cable	PP	Motel, hotel		Family Cable \$ 86.99
 Pay cable—add'l channel 	PP	Commercial		
 Fire protection 		• Pay cable		
Burglar protection		Pay cable-add'l channel		
Installation: Residential		Fire protection		
• First set	\$ 109.99	Burglar protection		
 Additional set(s) 	15.00-49.00	Other services:		
 FM radio (if separate rate) 		Reconnect	\$ 49.00	
Converter	\$ 10.50	Disconnect		
		Outlet relocation	15.00-49.00	
		Move to new address		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 015474 MCC Iowa, LLC (Fort Dodge, IA) PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if 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 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) KCCI/KCCI(HD) C 8 Ν No Des Moines, IA **KCCI-DT2 MeTV** 8.2 I No Des Moines, IA See instructions for **KCCI-DT3 My Net/** 8.3 ı No Des Moines, IA additional information n alphabetization. KCWI/KCWI(HD) (23 ı No Ames. IA KCWI-DT2 PBS C 23.2 No Ames, IA ı KCWI-DT3 PBS B 23.3 ı No Ames, IA **KDMI TCT** 56 ı No Des Moines, IA KDSM/KDSM(HD) 16 I Des Moines, IA No **KDSM-DT2** Come 16.2 ı No Des Moines, IA KDSM-DT3 Charg 16.3 ı No Des Moines, IA Des Moines, IA KDSM-DT4 TBD I 16.4 No KFPX/KFPX HD IC 39 ı No Newton, IA **KMEG-DT1 DABL** 14.1 ı 0 Sioux City, IA Yes Ε KTIN/KTIN(HD) PE 25 No Ft Dodge, IA KTIN-DT2 KIDS H 25.2 Ε No Des Moines, IA Des Moines, IA KTIN-DT3 World Ε 25.3 No KTIN-DT4 PBS Cr Ε Des Moines, IA 25.4 No WHO/WHO(HD) N 13 Ν Des Moines, IA No

LEGAL NAME OF OWNER OF CABLE SYSTEM:

MCC Iowa, LLC (Fort Dodge, IA)

Name

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	AA Cont	
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
WHO-DT2 Sports	13.2	ı	No		Des Moines, IA
WHO-DT3 Antenn	13.3	ı	No		Des Moines, IA
WOI/WOI(HD) ABO	5	N	No		Ames, IA
WOI-DT2 Laff	5.2	ı	No		Ames, IA
WHO-DT4 Court T	13.4	I	No		Des Moines, IA
WOI-DT3 Grit	5.3	I	No		Ames, IA
WOI-DT4 Cozi TV	5.4	I	No		Ames, IA
KCWI-DT4 Quest	23.4	ı	No		Ames, IA

G

Primary Transmitters: Television

MCC Iowa, LLC (Fort Dodge, IA)	015474	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.

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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.

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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
KCCI/KCCI(HD) C	8	N	No		Des Moines, IA
KCCI-DT2 MeTV	8.2	I	No		Des Moines, IA
KCCI-DT3 My Net/	8.3	I	No		Des Moines, IA
KCWI/KCWI(HD)	23	I	No		Ames, IA
KCWI-DT2 PBS C	23.2	I	No		Ames, IA
KCWI-DT3 PBS B	23.3	I	No		Ames, IA
KDMI TCT	56	I	No		Des Moines, IA
KDSM/KDSM(HD)	16	I	No		Des Moines, IA
KDSM-DT2 Come	16.2	I	No		Des Moines, IA
KDSM-DT3 Charg	16.3	I	No		Des Moines, IA
KDSM-DT4 TBD	16.4	I	No		Des Moines, IA
KFPX/KFPX HD IC	39	I	No		Newton, IA
KTIN/KTIN(HD) PE	25	E	No		Ft Dodge, IA
KTIN-DT2 KIDS H	25.2	E	No		Des Moines, IA
KTIN-DT3 World	25.3	E	No		Des Moines, IA
KTIN-DT4 PBS Cr	25.4	E	No		Des Moines, IA
WHO/WHO(HD) N	13	N	No		Des Moines, IA
WHO-DT2 Sports	13.2	I	No		Des Moines, IA

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
MCC lowa, LLC (Fort Dodge, IA)	015474	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 specific 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.

			AB Cont	
2. B'CAST CHANNEL NUMBER		4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
13.3	I	No		Des Moines, IA
5	N	No		Ames, IA
5.2	I	No		Ames, IA
13.4	I	No		Des Moines, IA
5.3	I	No		Ames, IA
5.4	I	No		Ames, IA
23.4	1	No		Ames, IA
	CHANNEL NUMBER 13.3 5 5.2 13.4 5.3 5.4	CHANNEL OF STATION 13.3 I 5 N 5.2 I 13.4 I 5.3 I 5.4 I	CHANNEL NUMBER OF STATION (Yes or No) 13.3 I No 5 N No 5.2 I No 13.4 I No 5.3 I No 5.4 I No	CHANNEL NUMBER OF STATION (Yes or No) CARRIAGE (If Distant) 13.3 I No 5 N No 5.2 I No 13.4 I No 5.3 I No 5.4 I No

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

MCC Iowa, LLC (Fort Dodge, IA)

Name

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.

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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
KCCI/KCCI(HD) C	8	N	No		Des Moines, IA
KCCI-DT2 MeTV	8.2	I	No		Des Moines, IA
KCCI-DT3 My Net/	8.3	I	No		Des Moines, IA
KCWI/KCWI(HD)	23	I	No		Ames, IA
KCWI-DT2 PBS C	23.2	I	No		Ames, IA
KCWI-DT3 PBS B	23.3	I	No		Ames, IA
KDIN/KDIN(HD) P	11	Е	No		Des Moines, IA
KDIN-DT2 PBS KI	11.2	Е	No		Des Moines, IA
KDIN-DT3 PBS W	11.3	Е	No		Des Moines, IA
KDIN-DT4 PBS Cr	11.4	Е	No		Des Moines, IA
KDMI TCT	56	I	No		Des Moines, IA
KDSM/KDSM(HD)	16	I	No		Des Moines, IA
KDSM-DT2 Come	16.2	I	No		Des Moines, IA
KDSM-DT3 Charg	16.3	I	No		Des Moines, IA
KDSM-DT4 TBD	16.4	I	No		Des Moines, IA
KFPX/KFPX HD IC	39	I	No		Newton, IA
WHO/WHO(HD) N	13	N	No		Des Moines, IA
WHO-DT2 Sports	13.2	ı	No		Des Moines, IA

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
MCC Iowa, LLC (Fort Dodge, IA)	015474	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 Cont	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	-	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WHO-DT3 Antenn	13.3	I	No		Des Moines, IA
WOI/WOI(HD) ABO	5	N	No		Ames, IA
WOI-DT2 Laff	5.2	I	No		Ames, IA
WHO-DT4 Court T	13.4	I	No		Des Moines, IA
WOI-DT3 Grit	5.3	I	No		Ames, IA
WOI-DT4 Cozi TV	5.4	I	No		Ames, IA
KCWI-DT4 Quest	23.4	ı	No		Ames, IA

G

Primary Transmitters: Television

ACCOUNTING PERIOD: 2021/2 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 015474 MCC Iowa, LLC (Fort Dodge, IA) PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **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

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

FURM SAJE. PAGE 5.							PERIOD: 2021/
LEGAL NAME OF OWNER OF MCC lowa, LLC (Fort I						8YSTEM ID# 015474	Namo
						0104/4	
In General: In space I, ident substitute basis during the a	tify every no	nnetwork televi	sion program broadcast by a	a distant statio			ı
explanation of the programm	ning that mu	st be included i	n this log, see page (v) of th	e general inst	tructions located in the pa	aper SA3 form.	Substitute
1. SPECIAL STATEMENT	CONCER	RNING SUBST	TITUTE CARRIAGE				Carriage: Special
 During the accounting per broadcast by a distant state 	•	ur cable system	n carry, on a substitute bas	s, any nonne	etwork television progran		Statement and Program Log
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.							
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love L Column 2: If the prograr Column 3: Give the call Column 4: Give the broat the case of Mexican or Car Column 5: Give the mor first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progratice, please of every no distant state gulations, contion. Do not be distant state gulations, contion. Do not be distant state and the and day we "5/7." Les when the Example: a state of the distant state of the distant state of the distant state of the distant state of the distance of the	am on a separa attach addition innetwork televition and that your authorization of use general aba Basketball: doast live, ente station broadca on's location (thons, if any, the when your system is a program carrillisted program carrillisted program in sin effect di	al pages. ision program (substitute pour cable system substitute is. See page (vi) of the gercategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute purpose gram was carried by your gied by a system from 6:01:	rogram) that, d for the program that, d for the program instruction." It is a station is lice station is idea to rogram. Use cable system 15 p.m. to 6:2 mming that y i; enter the le	ensed by the FCC or, in ntiffed). List the times accurate 28:30 p.m. should be your system was require "P" if the listed pro	tion hth	
effect off October 19, 1976	-			WHE	EN SUBSTITUTE	7. REASON	
S	UBSTITUT	ΓΕ PROGRAM	1	CARR	IAGE OCCURRED	FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION	
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ACCOUNTING PERIOD: 2021/2 FORM SA3E. PAGE 6.

	LEGAL NAME OF	OWNER OF CABLE	SYSTEM:							S	YSTEM ID#
Name	MCC Iowa, L	MCC Iowa, LLC (Fort Dodge, IA) 015474									
	PART-TIME CARRIAGE LOG										
J Part-Time Carriage Log	time carriage du hours your syst 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	State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the delevision station's broadcast day, you may give an approximate ending hour, followed by the abbreviation fapp." Example: "12:30 a.m.— 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.—									
			DA	TES A	AND HOURS (OF F	ART-TIME CAR	RIAGE			
	0.11.0101	WHEN	N CARRIAGE OC	CCUR	RED			WHEN	I CARRIAGE OC	CUR	RED
	CALL SIGN	DATE		OURS			CALL SIGN	DATE		URS	
		DATE	FROM		ТО			DATE	FROM		ТО
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	L NAME OF OWNER OF CABLE SYSTEM: C Iowa, LLC (Fort Dodge, IA)	SYSTE 0'	EM ID# 15474 Name					
GR Inst all a (as pag	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount yo 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 come (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.	u pay. Enter the total of ary transmission service	K Gross Receipts					
COPY Instru • Con • Con • If you fee • If you	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	k 3 below. Int 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered blow. Int 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below. MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more ar least the minimum fee, regardless of whether they carried any distant stations. This fee is system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here. This is your minimum fee.	be entered on line	$\overline{\exists}$					
Block 2	Block DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information you gave in							
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 Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero Line 3. Add lines 1 and 2 and enter here	\$ 1,699 0 \$ 1,699	.00					
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 zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		D.00 Cable systems submitting additional deposits under Section 111(d)(7)					

Name		EM ID# 15474									
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations.										
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services. 71										
N Individual to Be Contacted	ted										
for Further Information	Name Kenneth J. Kohrs Telephone 845-443-2762 Address One Mediacom Way										
	Address One Mediacom Way (Number, street, rural route, apartment, or suite number) Mediacom Park, NY 10918 (City, town, state, zip)										
	Email Copyrights@mediacomcc.com Fax (optional)										
O Certifcation	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.) • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)										
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or										
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or										
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the cable system in line 1 of space B.										
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]										
	X /s/ Kenneth J. Kohrs										
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.										
	Typed or printed name: Kenneth J. Kohrs										
	Title: Vice President, Financial Reporting (Title of official position held in corporation or partnership)										
	Date: February 22, 2022										

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.

LEGAL NAME OF OWNER OF O	CABLE SYSTEM:	SYSTEM ID#	Nama
MCC Iowa, LLC (For	t Dodge, IA)	015474	Name
The Satellite Home Vie lowing sentence: "In determining service of proviscribers and an For more information of paper SA3 form. During the accounting made by satellite carried. X NO	RENT CONCERNING GROSS RECEIPTS EXCLUSIONS Ever Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by addition the total number of subscribers and the gross amounts paid to the cable system for the ding secondary transmissions of primary broadcast transmitters, the system shall not nounts collected from subscribers receiving secondary transmissions pursuant to sect on when to exclude these amounts, see the note on page (vii) of the general instruction period did the cable system exclude any amounts of gross receipts for secondary transmiss to satellite dish owners?	he basic include sub- ion 119."	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address	Name Mailing Address		
INTEREST ASSES	SMENTS		
You must complete this	s worksheet for those royalty payments submitted as a result of a late payment or unc nterest assessment, see page (viii) of the general instructions in the paper SA3 form.	lerpayment.	Q
Line 1 Enter the amou	unt of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 I	by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 l	by the number of days late and enter the sum here	0.00274	
space	by 0.00274** enter here and on line 3, block 4, L, (page 7)	est charge)	
	est rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assista sing Division at (202) 707-8150 or licensing@loc.gov.	ance please	
** This is the decim	nal equivalent of 1/365, which is the interest assessment for one day late.		
•	this worksheet covering a statement of account already submitted to the Copyright Owner, address, first community served, accounting period, and ID number as given in		
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: 2021/2

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	0.25
Note that local stations are not counted at all in computing DSEs.	

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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.

service areas (of stations B, D, and E.	TC
Santa Rosa	Stations A and C 35 mile zone	Mi
	`~ - / `	(S
-	Fairvale	Gr
Rapid City		DS
		Ва
	Bodega	\$3
	- ► Bay	\$3
/		Ва
\ an	ns B, D, d E le zone	To In
` -	_ /	I

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

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

		\$6,384.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

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

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

ACCOUNTING PERIOD: 2021/2

MCC Iowa, LLC (Fort Dodge, IA) SUM OF DSEs OF CATEGORY "O" STATIONS:	**************************************
SUM OF DSEs OF CATEGORY "O" STATIONS:	015474
Add the DSEs of each station.	
Enter the sum here and in line 1 of part 5 of this schedule.	
Instructions:	
In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5	
of space G (page 3).	
Computation of DSEs for mercial educational station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as "2.5."	
Category "O" CATEGORY "O" STATIONS: DSEs	
Stations CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
KMEG-DT1 DABL 1.000	DOL
TAMEG-D11 DADE 1.000	
	····
	<mark></mark>
	<mark></mark>
Add rows as	
necessary.	
Remember to copy all	
formula into new	
rows.	<mark></mark>
	<mark></mark>
	<mark></mark>
	····
	<u> </u>

Name		WNER OF CABLE SYSTEM: LC (Fort Dodge, IA)						SYSTEM ID# 015474			
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 1: Lis Column 2: figure should c Column 3: Column 4: be carried out Column 5: give the type-v Column 6:	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.									
Capacity		CATEGORY LAC STATIONS: COMPUTATION OF DSEs									
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE		PE 6. D	SE			
			÷		=	x	=				
			÷ ÷		=	x x	=				
			÷			x	=				
			÷		=	x	=				
			÷		=	x	=				
			÷ ÷		=	x x	=				
Computation of DSEs for Substitute-Basis Stations	Instructions: Column 1: Give • Was carried tions in effee • Broadcast or space I). Column 2: F at your option. T Column 3: E Column 4: E	the call sign of each state by your system in substitct on October 19, 1976 (and or more live, nonnetwork). This figure should correst the number of days bivide the figure in column this is the station's DSE (ation listed in space tution for a progra as shown by the learly programs during number of live, no pond with the info- in the calendar ye n 2 by the figure in	ce I (page 5, the Log am that your system etter "P" in column 7 g that optional carri connetwork programs formation in space I. ear: 365, except in a n column 3, and giv	g of Substitute Pro was permitted to of space I); and age (as shown by the s carried in substitute a leap year.	ograms) if that station: delete under FCC ruline word "Yes" in column tution for programs that	n 2 of at were deleted ss than the third	m).			
		SL	JBSTITUTE-B	ASIS STATION	IS: COMPUTA	TION OF DSEs					
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE			
		÷		=			÷	=			
		-					÷				
			+	=			÷				
		-		=			÷	=			
	Add the DSEs of	÷ OF SUBSTITUTE-BASIS of each station. on here and in line 3 of pa	S STATIONS:	ule,	▶	0.	00	=			
5		R OF DSEs: Give the amo		es in parts 2, 3, and	4 of this schedule	and add them to provid	le the total				
Total Number	1. Number	of DSEs from part 2 ●				-	1.00				
of DSEs	2. Number	of DSEs from part 3 ●				•	0.00				
	3. Number	of DSEs from part 4 ●				<u> </u>	0.00				
	TOTAL NUMBEI	R OF DSEs					•	1.00			
	I										

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2021/2

LEGAL NAME OF O	WNER OF CABLE S	SYSTEM:					S	YSTEM ID#	
MCC Iowa, LL	C (Fort Dodge,	IA)						015474	Name
In block A:	ck A must be comp		art 6 and part 7	of the DSE schedu	ule blank and	complete part	8, (page 16) of the		6
	"No," complete blo	cks B and C b							
				TELEVISION MA					Computation of 3.75 Fee
effect on June 24, Yes—Com	1981?	schedule—D0	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	
		BLO	CK B: CARF	RIAGE OF PERM	MITTED DS	SEs			
Column 1: CALL SIGN	FCC rules and re	of distant sta gulations price DSE Scheo	itions listed in porto June 25, 1	part 2, 3, and 4 of the 981. For further ex e letter M below ref	his schedule t	that your syster permitted statio	ns, see the	•	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions fo E Carried pursua *F A station previous	les and reguled pursuant to on as defined all educational station (76.6 r DSE scheduant to individuationally carried	ations cited be the FCC mark in 76.5(kk) (76 I station [76.59 5) (see paragrule). all waiver of FC don a part-timethin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 57, 76.59(b), (1), 76.63(a) 8(a) referring stitution of gra	June 24, 1981. 76.61(b)(c), 76 referring to 76. to 76.61(d)] and fathered state 25, 1981	6.63(a) referring to 61(e)(1) tions in the		
Column 3:	*(Note: For those this schedule to c	e stations ider determine the	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2	, you must co	omplete the wor	1	<u> </u>	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
KMEG-DT1	М	1.00							
								1.00	
		E	BLOCK C: CC	OMPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of l	DSEs from p	art 5 of this s	chedule					
Line 2: Enter the	sum of permitted	d DSEs from	block B abo	ve					
				of DSEs subject t of this schedule		ate.			
Line 4: Enter gro	ess receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375 a	nd enter sur	n here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line 3	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 and	d enter here	and on line 2	, block 3, space L	_ (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Fort Dodge, IA) 015474									Name
		BLOC	A: TELEVI	SION MARKETS	G (CONTINI	UED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation 6
							-		
••••••						•			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MCC Iowa, LLC (Fort Dodge, IA) 015474 Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSF **PERIOD CARRIAGE** DSE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? X Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Was any station listed in block B of part 7 carried in any commu-Is any station listed in block B of part 6 the primary stream of a commercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE DSE KCCI/KCCI(HD) 0.25 **KCCI-DT2 MeT** 1.00 WOI/WOI(HD) A 0.25 WHO/WHO(HD) 0.25 WHO-DT2 Iowa #N/A WHO-DT3 Ante 1.00 KCCI-DT3 My N 1.00 #N/A 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Fort Dodge, IA)	SYSTEM ID# 015474	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,429,705.97	7
Section 2	A. Enter the total DSEs from block B of part 7	#N/A	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	#N/A	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below	I.	
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. X 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 DS	SE	
	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)		
	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	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)		
	Syndicated Exclusivity Surcharge		Ì

Name	-	ME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Fort Dodge, IA)	SYSTEM ID# 015474					
7 Computation of the	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) ▶ \$						
Syndicated Exclusivity Surcharge		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.						
8		Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge. \$\text{\$\text{ctions:}}\$ ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p						
Computation of Base Rate Fee	• In blo • If you • If you blank What i were lo	checked "Yes," use the total number of DSEs from part 5. cock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. In answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. In answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. It is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local area," see page (v) of the general instructions.						
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS • 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 following sections.							
	<u>L</u>	Yes—Complete part 9 of this schedule. BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE						
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _ \$						
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.).						
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1).						
		B. Enter 0.00701 of gross receipts (the amount in section 1)						
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here. D. Multiply line B by line C and enter here. \$\bigs\sum_{\text{\texi{\text{\texi{\text{\text{\texi\texi{\text{\texi\texi{\texi\texi{\text{\texi{\texi{\texi{\texi{\texi{\texi\texi{\texi{\texi{						
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee.	0.00					

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2021/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC lowa, LLC (Fort Dodge, IA)	SYSTEM ID# 015474 Name
Section If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.	_
A. Enter 0.01064 of gross receipts (the amount in section 1) * ** ** ** ** ** ** ** ** **	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 \$	
D. Enter 0.00330 of gross receipts (the amount in section 1) * \$	
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here	
F. Multiply line D by line E and enter here	
G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$	0.00
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of televis instead be reported on a community-by-community basis (subscriber groups) if the cable system reported mu Space G.	
in General: If any of the stations you carried were partially distant, the statute allows you, in computing your be receipts from subscribers located within the station's local service area, from your system's total gross receipt exclusion, you must:	s. To take advantage of this of
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your	Determine the number of rate fee for each group. Syndicated Exclusivity Surcharge
NOTE: If any portion of your cable system is located within the top 100 television market and the station is no also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block if your cable system is wholly located outside all major television markets, complete block A only.	exempt in part 7, you must A and B below. However, Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations Step 1: For each community served, determine the local service area of each wholly distant and each partially carried to that community.	for Partially Permitted Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscrioutside the station's local service area. A subscriber located outside the local service area of a station is distant to the same token, the station is distant to the subscriber.)	
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stati system will have only one subscriber group when the distant stations it carried have local service areas that c	ons. Note that a cable
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each groups.	of your system's subscriber
In each section:	
 Identify the communities/areas represented by each subscriber group. Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is subscribers in the group. 	distant to all of the
If:1) your system is located wholly outside all major and smaller television markets, give each station's DSE as 4 of this schedule; or,	ou gave it in parts 2, 3, and
2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you part 6 of this schedule.	gave it in block B,
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the paper SA3 form.	he general instructions
 Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this sche page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscrib DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). Yo actual calculations on the form. 	er group (that is, the total

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 015474 MCC Iowa, LLC (Fort Dodge, IA) Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

MCC lowa, LLC (Fo						S'	YSTEM ID# 015474	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRII	BER GROUP		
-	FIRST	SUBSCRIBER GROU	Р	SECOND SUBSCRIBER GROUP			>	_
COMMUNITY/ AREA	Calhour	n County; Lake C	ity; Mans	COMMUNITY/ AREA	MMUNITY/ AREA All other Communities			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
KMEG-DT1 DABL	1.00							Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
					<u>.</u>			Stations
						-		
	1		T		*			
Total DSEs			1.00	Total DSEs			0.00	
Gross Receipts First Gro	oup.	¢ 150	,760.26	Gross Passints Sasan	Gross Receipts Second Group \$ 1,269,945.71			
Bioss Receipts Filst Git	oup	\$ 159	,700.20	Gioss Receipts Secon	u Group	\$ 1,20	09,940.71	
Base Rate Fee First Gro	oup	\$ 1	,699.85	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	P		FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u> </u>	<u> </u>		
					<u>.</u>	-		
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	 				ļ		_	
	 				<u> </u>			
	 					-		
			 		-	 -		
Total DSEs		1	0.00	Total DSEs	-		0.00	
		•			C****	•	-	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
3ase Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	base rate	e fees for each subscri		s shown in the boxes abo		\$	1,699.85	

LEGAL NAME OF OWNI MCC lowa, LLC (I						\$	015474	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE			Computation of	
07.22 0.0.1	332	07.22 0.0.1	332	07.22 5.5.1	332	0/122 01011	332	Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharg
								for
								Partially
								Distant Stations
			····			-		Stations
	····		····			-		
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	DUP		EIGHTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
		H				-		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				<u>II</u>				
		e fees for each subs pace L (page 7)	criber group a	as shown in the boxes	above.	\$		

COMMUNITY/ AREA				TE FEES FOR EAC	H SUBSCRIE	BER GROUP				
COMMUNITY/ AREA										
		NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP								
CALL SIGN E			0	COMMUNITY/ AREA 0				9		
0/122 01011	SE	CALL SIGN	DSE	CALL SIGN	Computatio					
	,OL	O/ LE OIOIV	DOL	O'ALL GIGIT	DSE	CALL SIGN	DSE	Base Rate F		
								and		
								Syndicate		
								Exclusivit		
								Surcharge		
			<u>.</u>					for		
			<mark></mark>					Partially		
			<mark></mark>					Distant		
			<mark></mark>					Stations		
			<mark></mark>							
			-							
			<u> </u>							
			<u> </u>							
otal DSEs			0.00	Total DSEs			0.00			
			0.00	Gross Receipts Seco	nd Group	\$	0.00			
	-			·						
ase Rate Fee First Group		\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00			
ELEV	ENTH S	SUBSCRIBER GROU	JP		TWELVTH	SUBSCRIBER GROU	JP			
OMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN [SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			<mark></mark>							
			<mark></mark>							
			<u>-</u>							
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			<u>.</u>							
otal DSEs			0.00	Total DSEs	<u>'</u>		0.00			
ross Receipts Third Grou	o _	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
	ſ						<u> </u>			
ase Rate Fee Third Group	o	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			

LEGAL NAME OF OWNE MCC lowa, LLC (F						S	015474	Name
		COMPUTATION O SUBSCRIBER GROU		TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Calhou	n County; Lake C	ity; Man	COMMUNITY/ AREA	MUNITY/ AREA All other Communities			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated Exclusivity
								Surcharge
								for Partially
								Distant
					<u> </u>			Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	s 159	,760.26		Gross Receipts Second Group \$ 1,269,945.71			
Base Rate Fee First G	-	\$	0.00	Base Rate Fee Secon		\$	0.00	
COMMUNITY/ AREA	THIRD	SUBSCRIBER GROU	<u>JP</u> 0	COMMUNITY/ AREA	FOURTH	1 SUBSCRIBER GROU	JP 0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourth Group \$ 0.00			0.00		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				<u> </u>				
Base Rate Fee: Add the Enter here and in block			riber group a	s shown in the boxes ab	oove.	\$	0.00	

Nonpermitted 3.75 Stations

of Base Rate and Syndicate Exclusivi Surcharg for Partially
Computati of Base Rate and Syndicate Exclusivit Surcharg for Partially Distant
Computati of Base Rate and Syndicate Exclusivit Surcharg for Partially Distant
of Base Rate and Syndicate Exclusivi Surcharg for Partially
and Syndicate Exclusivi Surcharg for Partially
Syndicate Exclusivit Surcharg
Exclusivit Surcharg for Partially
Surcharg for Partially Distant
for Partially Distant
Partially Distant
Stations
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LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Fort Dodge, IA) O15474								
				TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO	UP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		 						Syndicated
		<u> </u>	<mark></mark>					Exclusivity
			·····					Surcharge for
	<u> </u>		····					Partially
								Distant
								Stations
			<mark></mark>					
			·····					
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
	LEVENTH	SUBSCRIBER GRO				SUBSCRIBER GRO	UP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<mark></mark>					
	····		·····					
			·····					
	···		····					
T + 1 DOS			0.00	T			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
e Fee Third G	Group se base rat e	\$	0.00		rth Group			

ACCOUNTING PERIOD: 2021/2

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MCC Iowa, LLC (Fort Dodge, IA) 015474 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. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **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. SECOND SUBSCRIBER GROUP FIRST 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 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE **SURCHARGE** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2021/2

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MCC Iowa, LLC (Fort Dodge, IA) 015474 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. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **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. FIFTH SUBSCRIBER GROUP SIXTH 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 Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 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** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Fort Dodge, IA) 015474								
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
TH		SUBSCRIBER GRO		FOURTEENTH SUBSCRIBER GROUP				_
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0			9 Commutation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.122 0.0.1	332	07.22 0.0.1	332	07.22 5.6.1	332	07122 01011	302	Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
		-						Partially
		-						Distant Stations
	·····	H	····			-		Stations
			····			-		
otal DSEs			0.00	Total DSEs			0.00	
iross Receipts First Group \$ 0.0			0.00	Gross Receipts Second Group \$ 0.00			0.00	
Base Rate Fee First Group \$ 0.00			Base Rate Fee Second Group \$ 0.00			0.00		
FIFTEENTH SUBSCRIBER GROUP				SIXTEENTH SUBSCRIBER GROUP				
OMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		<u> </u>						
		H				<u> </u>		
		H						
						<u> </u>		
		H						
		H	····			H		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$		0.00	Gross Receipts Fourth Group \$ 0.		0.00			
							$\overline{}$	
Base Rate Fee Third Group \$		\$	0.00	Base Rate Fee Fourth Group		\$	0.00	
Base Rate Fee: Add t			criber group a	s shown in the boxes	above.	\$		

	Dodge	, IA)				•	015474	Name
BLO	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN E)SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O/LEE GIGIT	, o _	O/ LEE O/O/4	DOL	O, LEE O.O.Y	DOL	O/ IEE O/O/I	BGE	Base Rate F
								and
								Syndicate
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						_		Surcharge
								for
								Partially
								Distant Stations
								Stations
otal DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First Group		\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
	Ī							
ase Rate Fee First Group		\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
NINTE	ENTH S	SUBSCRIBER GROU	IP	-	TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN E	OSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						_		
						_		
	 							
otal DSEs			0.00	Total DSEs		-	0.00	
Year Dagginto Third Cray	p .	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Gross Receipts Third Group								

	t Dodg	ESYSTEM: e, IA)				S	015474	Name
BL	OCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		11		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
		0.122						Base Rate F
								and
								Syndicate
								Exclusivit
						_		Surcharge
								for
								Partially
					 			Distant Stations
				-	•••••••		••••	Otations
otal DSEs			0.00	Total DSEs			0.00	
Bross Receipts First Grou	ıp	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
ase Rate Fee First Grou	ıp	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
TWENTY	/-THIRD	SUBSCRIBER GRO	JP	TWENT	Y-FOURTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	Dee	
							DSE	
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otal DSEs			0.00	Total DSEs			0.00	
otal DSEs Gross Receipts Third Gro	up	\$	0.00	Total DSEs Gross Receipts Fourth	Group	\$		

MCC Iowa, LLC (Fort		SYSTEM:				S	015474	Name
BLO	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCRIE	BER GROUP		
		SUBSCRIBER GROU		П		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0/122 0/0/1		0,122 0.0.1	302	67 LEZ 676.1	302	07.122 0.0.1	302	Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
								Partially
								Distant Stations
								Stations
			ļ					
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group)	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
ase Rate Fee First Group)	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
TWENTY-SE'	/ENTH	SUBSCRIBER GROU	P	TWEN	ITY-EIGHTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			I		···-			
otal DSEs			0.00	Total DSEs			0.00	
otal DSEs Gross Receipts Third Grou	p	\$	0.00	Total DSEs Gross Receipts Fourt	h Group	\$	0.00	

EGAL NAME OF OWNE							015474	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.22 07077	332	07.22 0.0.1	332	07.22 5.6.1	332	0/122 0.011	332	Base Rate F
								and
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THI	RTY-FIRST	SUBSCRIBER GRO)UP	THIF	RTY-SECOND	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····			 		
						<u> </u>		
						-		
			····					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	th Group	\$	0.00	
							$\overline{}$	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	th Group	\$	0.00	
Base Rate Fee: Add t	ho haas vat	• for each out		an about in the bayes				

LEGAL NAME OF OWN MCC lowa, LLC (\$	015474	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
THI		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٨		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0,122 0.0.1	202	0/122 0:0:1	332	07.22 0.0.1	202	07122 01011	202	Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
								Partially
								Distant Stations
	·····		····			-		Stations
	·····	<u> </u>	····			-		
otal DSEs			0.00	Total DSEs			0.00	
Fross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
ase Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TH	IRTY-FIFTH	SUBSCRIBER GRO	DUP	TI	HIRTY-SIXTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						<u> </u>		
		H				-		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
								
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				II				
Base Rate Fee: Add Enter here and in bloo			criber group a	s shown in the boxes	above.	\$		

LEGAL NAME OF OWNI MCC lowa, LLC (I						\$	015474	Name
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		TT .		SUBSCRIBER GROU	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation
07.122 0.0.1	302	07.22 0.0.1	332	07.122 07011	332	07.122.01011	302	Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
		-						Partially
		-						Distant Stations
		H	····					Stations
	····		····					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THI	RTY-NINTH	SUBSCRIBER GRO	DUP		FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H	····					
	••••		····					
		-						
		 						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
							$\overline{}$	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				<u> </u>				
			criber group a	as shown in the boxes	above.	\$		
Base Rate Fee: Add t Enter here and in bloc				as shown in the boxes	above.	\$		

LEGAL NAME OF OWN MCC lowa, LLC (\$	015474	Name
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAC	CH SUBSCRI	BER GROUP		
FC		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL GIGIN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL GIGIT	DOL	Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
						<u> </u>		Partially
		H				<u> </u>		Distant Stations
		H						Stations
		<u> </u>	····			 		
otal DSEs			0.00	Total DSEs			0.00	
Fross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FO	RTY-THIRD	SUBSCRIBER GRO	DUP	FOF	RTY-FOURTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		<u> </u>						
		H				 		
		H				 		
		-						
		-						
		 						
otal DSEs			0.00	Total DSEs			0.00	
iross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Deep Data Face Add	the keep of	a face for the last	oribo	II	ahay-			
Base Rate Fee: Add Enter here and in bloo			criber group a	as shown in the boxes	above.	\$		

EGAL NAME OF OWN						\$	015474	Name
	BLOCK A	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
F		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α 0			9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate F
								and
								Syndicate
								Exclusivit
						<u> </u>		Surcharge
								for
		H						Partially
		H				H		Distant Stations
		H						Otations
						-		
		<u> </u>						
otal DSEs			0.00	Total DSEs		-	0.00	
Fross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FORT	Y-SEVENTH	SUBSCRIBER GRO	DUP	FO	RTY-EIGHTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H				<u> </u>		
		H						
						<u> </u>		
		H				H		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Date But Ever Title	1.0		2.00	Bass Battle 5 - 5	41- 0-			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	nn Group	\$	0.00	
				••				
sase Rate Fee: Add inter here and in blo			criber group a	as shown in the boxes	above.	\$		
nor nore and in bio	01(0, 11110 1, 0	pado E (pago 1)				Ψ		

LEGAL NAME OF OW MCC lowa, LLC						S	015474	Name
F		COMPUTATION O		ATE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for Partially
								Distant Stations
								Stations
Total DSEs	·		0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
		SUBSCRIBER GRO		ii .		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thire	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE MCC lowa, LLC (F						\$	015474	Name
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		TT .		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O/ IEE OIOIV	562	O/ LEE OF OTT	562	O' LEE O'O'T	502	O'ILL SIGIT	562	Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
		-						Partially
		-						Distant Stations
		H	····					Stations
	••••	<u> </u>	····			 		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
								
ase Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FI	FTY-FIFTH	SUBSCRIBER GRO	DUP		FIFTY-SIXTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		<u> </u>	····			<u> </u>		
		H	····					
			·····			 		
		-						
		H						
		H	····					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add tl Enter here and in blocl			criber group a	as shown in the boxes	above.	s		

LEGAL NAME OF OWN						\$	SYSTEM ID# 015474	Name
	BLOCK A	COMPUTATION	OF BASF RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
FIF1		SUBSCRIBER GRO		TT .		SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA	A		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
						3.1223.3.1		Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
								Partially Distant
		H						Stations
		H						Otations
		<u> </u>						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
sase Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GROU		
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H						
		H						
		H						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Popo Poto For Thi	d Crave		0.00	Page Pete Fee F	th Crave		0.00	
Base Rate Fee Third	и отоир	\$	0.00	Base Rate Fee Fou	ш Стоир	\$	0.00	
_			_					
ase Rate Fee: Add nter here and in blo			criber group a	as shown in the boxes	above.	\$		

DI C		e, IA)					015474	Name
DLC	OCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCRII	BER GROUP		
SIXTY	-FIRST	SUBSCRIBER GRO	JP	SIX	TY-SECOND	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN I	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL GIGIT	DOL	OALL GIGIT	DOL	OALE GIGIN	DOL	CALL SIGN	DOL	Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharg
								for
								Partially
								Distant
								Stations
			<u></u>					
			<u></u>					
			<u></u>					
otal DSEs	ų.		0.00	Total DSEs			0.00	
ross Receipts First Group	n	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
ross recoupts i list Group	,	<u>+</u>	0.00	Gross Receipts ceed	na Group		0.00	
ase Rate Fee First Group)	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SIXTY-	THIRD	SUBSCRIBER GRO	JP	SIX	TY-FOURTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
			<u></u>					
						_		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Grou	D	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
		· · · · · · · · · · · · · · · · · · ·						

LEGAL NAME OF OWNE MCC lowa, LLC (F						\$	015474	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O' LEE GIGIT	562	O/ LEE GIGIT	562	O/ IEE O'O'N	562	O'ILL SIGIT	562	Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
								Partially
								Distant Stations
	·····		····					Stations
		<u> </u>	····			 		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First C	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SIXTY	-SEVENTH	SUBSCRIBER GRO	DUP	S	XTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
		H				 		
	<u>.</u>							
		H	····					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group a	s shown in the boxes	above.	\$		

MCC Iowa, LLC (For		SYSTEM: e, IA)				S	YSTEM ID# 015474	Name
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	I SUBSCRII	BER GROUP		
		SUBSCRIBER GROU		П		SUBSCRIBER GROU	IP	_
COMMUNITY/ AREA			O COMMUNITY/ AREA		0		9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE	
O/ILL GIGIN	DOL	O' LEE O'O'N	DOL	O'ALE GIGIT	DOL	O/ LE OIOI4	DOL	of Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
								Partially
								Distant
								Stations
			ļ					
otal DSEs			0.00	Total DSEs	-		0.00	
ross Receipts First Grou	ıp	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
ase Rate Fee First Grou	ıp	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SEVENT	/-FIRST	SUBSCRIBER GROU	Р	SEVENT	Y-SECOND	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H		
						H		
			ļ					
	·		0.00	Total DSEs			0.00	
otal DSEs					Group	\$	0.00	
otal DSEs Gross Receipts Third Gro	up	\$	0.00	Gross Receipts Fourth	ГОГОЦР	<u>*</u>	0.00	
	up	\$	0.00	Gross Receipts Fourtr	ГОГОЦР	<u>*</u>	0.00	

LEGAL NAME OF OWN MCC lowa, LLC (\$	015474	Name
	BLOCK A:	COMPUTATION	OF BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
SEVE		SUBSCRIBER GRO		TT		SUBSCRIBER GROU	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA		0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE	
0,122 0.0.1	202	07.22 070.1	332	07.22 0.0.1	332	07122 01011	302	of Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
		-						Partially
								Distant Stations
		H						Stations
			····			 		
otal DSEs			0.00	Total DSEs			0.00	
Fross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SEVE	ENTY-FIFTH	SUBSCRIBER GRO	DUP	SEV	ENTY-SIXTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		<u> </u>				<u> </u>		
		H						
						 		
		-						
		H						
		H				-		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
			criber group a	as shown in the boxes	above.	¢.		
nter here and in bloo	ск 3, line 1, s	pace L (page 7)				\$		

	odge,	YSTEM: IA)				S	YSTEM ID# 015474	Name
BLOC	K A: CC	OMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRIE	BER GROUP		
		JBSCRIBER GROU		П		SUBSCRIBER GROU	Р	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN DS	E II	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate F
								and
								Syndicate
								Exclusivit
								Surcharge
								for
								Partially
								Distant
								Stations
					<u>.</u>			
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					<u>.</u>			
	ļ.ļ.		0.00	T			0.00	
otal DSEs	_		0.00	Total DSEs		-	0.00	
ross Receipts First Group	\$		0.00	Gross Receipts Secon	d Group	\$	0.00	
ase Rate Fee First Group	\$		0.00	Base Rate Fee Secon	d Group	\$	0.00	
SEVENTY-NI	NTH SL	JBSCRIBER GROU	P		EIGHTIETH	SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
	П	CALL SIGN	DSE	CALL SIGN		T		
CALL SIGN DS	E	CALL SIGN	DOL		DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL SIGN			DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALE SIGN			DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL SIGN			DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL SIGN			DSE	CALL SIGN	DSE	
CALL SIGN DS	Ε	CALL SIGN	562		DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL SIGN			DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL SIGN			DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL GIGIN			DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL SIGN			DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL GIGIN			DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL GIGIN			DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL SIGN			DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL GIGIN			DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL GIGIN			DSE	CALL SIGN	DSE	
	E	CALL SIGN	0.00	Total DSEs	DSE	CALL SIGN	DSE	
CALL SIGN DS Cotal DSEs Coross Receipts Third Group	\$			Total DSEs Gross Receipts Fourth		\$		

EIGHTY-FIRST SUBS	O.00 O.00 O.00 O.00		DSE	ER GROUP SUBSCRIBER GROUP CALL SIGN \$	0 DSE	Gomputation of Base Rate Fand Syndicated Exclusivity Surcharge for Partially Distant Stations
EIGHTY-FIRST SUBSTANCE COMMUNITY/ AREA CALL SIGN DSE CA Total DSEs Gross Receipts First Group \$ Base Rate Fee First Group \$	SCRIBER GROUP O ALL SIGN DSE O O O O O O O O O O	CALL SIGN CALL SIGN Total DSEs Gross Receipts Second	DSE	CALL SIGN	0 DSE	of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
CALL SIGN DSE CA	0.00 0.00	Total DSEs Gross Receipts Second	d Group		DSE	of Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant
Total DSEs Gross Receipts First Group \$ Base Rate Fee First Group	0.00	Total DSEs Gross Receipts Second	d Group		0.00	of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
Total DSEs Gross Receipts First Group \$ Base Rate Fee First Group	0.00	Total DSEs Gross Receipts Second	d Group		0.00	Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant
Gross Receipts First Group \$ Base Rate Fee First Group \$	0.00	Gross Receipts Second		\$		Syndicated Exclusivity Surcharge for Partially Distant
Gross Receipts First Group \$ Base Rate Fee First Group \$	0.00	Gross Receipts Second		\$		Exclusivity Surcharge for Partially Distant
Gross Receipts First Group \$ Base Rate Fee First Group \$	0.00	Gross Receipts Second		\$		Surcharge for Partially Distant
Gross Receipts First Group \$ Base Rate Fee First Group \$	0.00	Gross Receipts Second		\$		for Partially Distant
sross Receipts First Group \$ sase Rate Fee First Group \$	0.00	Gross Receipts Second		\$		Partially Distant
iross Receipts First Group \$ sase Rate Fee First Group \$	0.00	Gross Receipts Second		\$		Distant
sross Receipts First Group \$ sase Rate Fee First Group \$	0.00	Gross Receipts Second		\$		
sross Receipts First Group \$ sase Rate Fee First Group \$	0.00	Gross Receipts Second		\$		Stations
iross Receipts First Group \$ sase Rate Fee First Group \$	0.00	Gross Receipts Second		\$		
sross Receipts First Group \$ sase Rate Fee First Group \$	0.00	Gross Receipts Second		\$		
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iross Receipts First Group \$ sase Rate Fee First Group \$	0.00	Gross Receipts Second		\$		
Gross Receipts First Group \$ Base Rate Fee First Group \$	0.00	Gross Receipts Second		\$		
iross Receipts First Group \$ sase Rate Fee First Group \$	0.00	Gross Receipts Second		\$		
ase Rate Fee First Group \$				\$	0.00	
	0.00	Base Rate Fee Second				
	0.00	Base Rate Fee Second			11	
EIGHTY-THIRD SUBS			d Group	\$	0.00	
	SCRIBER GROUP	EIGHTY	Y-FOURTH:	SUBSCRIBER GROUP		
OMMUNITY/ AREA	0	COMMUNITY/ AREA			0	
CALL SIGN DSE CA	ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs	0.00	Total DSEs			0.00	
ross Receipts Third Group \$	0.00	Gross Receipts Fourth	Group	\$	0.00	
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Base Rate Fee Third Group \$	0.00	Base Rate Fee Fourth	Group	\$	0.00	

LEGAL NAME OF OW MCC lowa, LLC						\$	015474	Name
E		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
						-		
Total DSEs		Ш	0.00	Total DSEs		 	0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
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Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
EIGHT COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	EIG COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	
OOMMONT 1770 CE				COMMONT 177 TREE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	II	above.	\$		

LEGAL NAME OF OWNE MCC lowa, LLC (F						\$	015474	Name	
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP			
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	•	
COMMUNITY/ AREA			0			0	9 Computation		
CALL SIGN	DSE	CALL SIGN			EE CALL SIGN DSE CALL SIGN DSE		CALL SIGN DSE		
0.122 0.011	202	0/122 0:0:1	332	07.22 0.0.1	332	0/122 01011	202	of Base Rate F	
								and	
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						-			
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
NIN	ETY-FIRST	SUBSCRIBER GRO	DUP	NINE	TY-SECOND	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
									
									
		H				<u> </u>			
	.								
	···	H	····						
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
Base Rate Fee: Add th		e fees for each subs pace L (page 7)	criber group a	as shown in the boxes	above.	s			

EGAL NAME OF OWN						\$	015474	Name		
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAC	CH SUBSCRI	BER GROUP				
NIN		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	•		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation		
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07.22 07077	332	07.122.010.1	332	07.22 0.011	202	07122 01011	302	of Base Rate F		
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otal DSEs			0.00	Total DSEs			0.00			
ross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
NI	NETY-FIFTH	SUBSCRIBER GRO	DUP	N	INETY-SIXTH	SUBSCRIBER GROU	JP			
OMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		H				<u> </u>				
						 				
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otal DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00			
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00			
				<u> </u>						
			criber group a	as shown in the boxes	above.					
nter here and in blo	ck 3, line 1, s	space L (page 7)				\$				

LEGAL NAME OF OW MCC lowa, LLC						S	015474	Name
NINE		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
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								Partially
								Distant Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	: Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GROU		
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	II	above.	\$		

	Dodge	SYSTEM: e, IA)				5	915474 015474	Name
BI O	CK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRIF	BER GROUP		
		SUBSCRIBER GROU		П		SUBSCRIBER GROU	IP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
SALE SIGIT		O/ LEE O/O/4	DOL	O/ LEE GIGIT	DOL	O/ ILL SIGIT	502	Base Rate F
								and
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otal DSEs	•		0.00	Total DSEs		-	0.00	
Gross Receipts First Group		\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
ase Rate Fee First Group		\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED T	HIRD S	SUBSCRIBER GROU	IP	ONE HUNDRE	D FOURTH	SUBSCRIBER GROU	IP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	SE	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	
CALL SIGN D		CALL SIGN				CALL SIGN		

	EM ID# 15474 Name
(A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
TH SUBSCRIBER GROUP ONE HUNDRED SIXTH SUBSCRIBER GROUP	
O COMMUNITY/ AREA	0 9
E CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE Of
	Base Rate
	and
	Syndicate
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	Surcharg
	for Partially
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	Stations
O.00 Total DSEs	0.00
\$ 0.00 Gross Receipts Second Group \$	0.00
\$ 0.00 Base Rate Fee Second Group \$	0.00
ITH SUBSCRIBER GROUP ONE HUNDRED EIGHTH SUBSCRIBER GROUP	
O COMMUNITY/ AREA	0
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0.00 Total DSEs	

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Synthesia	Name	015474	S						LEGAL NAME OF OWNER MCC lowa, LLC (Fo
ONE HUNDRED NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/		+	BER GROUP	SUBSCRII	TE FEES FOR EACH	BASE RA	COMPUTATION O	BLOCK A:	E
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base CALL SIGN DSE CALL SIGN	•	JP			П				
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Sylva	Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Suspension of the property of	ase Rate F								
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otal DSEs	Surcharge								
Solution of the community of the communi	for								
otal DSEs O.00 Foress Receipts First Group ONE HUNDRED ELEVENTH SUBSCRIBER GROUP ONE HUNDRED ELEVENTH SUBSCRIBER GROUP ONE HUNDRED TWELVTH SUBSCRIBER GROUP	Partially Distant								
otal DSEs	Stations								
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED ELEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Otationo								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 ONE HUNDRED ELEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA									
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED ELEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0									
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 ONE HUNDRED ELEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA									
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 ONE HUNDRED ELEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA				<u> </u>					
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 ONE HUNDRED ELEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA									
ONE HUNDRED ELEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA		0.00			Total DSEs	0.00			otal DSEs
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ONE HUNDRED ELEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA O O O O O O O O O O O O O									
OMMUNITY/ AREA 0 COMMUNITY/ AREA 0		0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gr
		JP	SUBSCRIBER GROU	TWELVTH	ONE HUNDRED	JP	SUBSCRIBER GRO	LEVENTH	ONE HUNDRED E
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE		0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
		DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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			H						
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otal DSEs Total DSEs		0.00			Total DSEs	0.00			otal DSEs
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00		0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Fross Receipts Third G
Dece Pate For Third Crown				Crav-	Page Bata Fair Fill 19	0.00			Door Bot- F TI 10
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00		0.00	\$	Эгоир	Dase Rate Fee Fourth	0.00	\$	ισαρ	ase Rate Fee Third G
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. nter here and in block 3, line 1, space L (page 7) \$			\$	ove.	s shown in the boxes ab	iber group a			

LEGAL NAME OF OWNE MCC lowa, LLC (F								Name
ONE HUNDRED THI				TE FEES FOR EACH		BER GROUP SUBSCRIBER GROU	JP.	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee and
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T			0.00	T			0.00	
Total DSEs Gross Receipts First G	roup.	c	0.00	Total DSEs Gross Receipts Seco	nd Group	¢	0.00	
Gloss Necelpts I list G	оир	.*	0.00	Gross Neceipis Seco	ila Gloup	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
ONE HUNDRED F COMMUNITY/ AREA	IFTEENTH	SUBSCRIBER GROU	JP 0	ONE HUNDRED COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th			riber group a	as shown in the boxes a	above.	\$		

	ABLE SYSTEM: odge, IA)				•	6YSTEM ID# 015474	Name
BLOC	K A: COMPUTATIO	N OF BASE R	TE FEES FOR EAC	CH SUBSCRII	BER GROUP		
ONE HUNDRED SEVENTEE					SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED NINTEE	NTH SUBSCRIBER (3ROUP	ONE HUNDRED	TWENTIETH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
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Fotal DSEs		0.00	Total DSEs			0.00	
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Fotal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	

•	lge, IA)					015474	Name
BLOCK	A: COMPUTATION (OF BASE RA	ATE FEES FOR EACH	I SUBSCRII	BER GROUP		
ONE HUNDRED TWENTY-FIRE			H		SUBSCRIBER GROUP		_
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation
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otal DSEs		0.00	Total DSEs			0.00	
Descripto Fig. 10	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Fross Receipts First Group			Oraco recorpto occor				
oross Receipts First Group			Order Hoselpis Goos.				
	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		•	Base Rate Fee Secon		\$ SUBSCRIBER GROUP	•	
Base Rate Fee First Group ONE HUNDRED TWENTY-THIR		•	Base Rate Fee Secon			•	
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LEGAL NAME OF OW MCC lowa, LLC									
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ONE HUNDRED TO		SUBSCRIBER GROUF	0	COMMUNITY/ AREA		SUBSCRIBER GROUP	0	9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								and Syndicated	
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	: Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
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74 Name	SYSTEM ID# 015474	·					ort Dodge	
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MCC lowa, LLC									
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Group \$ 0.00 -EIGHTH SUBSCRIBER GROUP 0	Total DSEs		0.00	Total DSEs			0.00	
-EIGHTH SUBSCRIBER GROUP 0	Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
-EIGHTH SUBSCRIBER GROUP 0								
0	Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	FORTY-SEVENTH	SUBSCRIBER GROU		FO	RTY-EIGHTH	SUBSCRIBER GROU	JP	
DSE CALL SIGN DSE	COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
	CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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			-					
0.00			0.00	Total DSEs			0.00	
roup <u>\$</u> 0.00	Total DSEs	¢	0.00	Gross Receipts Four	th Group	\$	0.00	
		\$		11				
roup \$ 0.00	Total DSEs Gross Receipts Third Group	<u> </u>]	

Nonpermitted 3.75 Stations

Name	YSTEM ID# 015474							MCC lowa, LLC (Fo
				TE FEES FOR EACH				
9	P 0	SUBSCRIBER GROU	FIFTIETH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	TY-NINTH	FORT
Computation		II out oou	l por	041, 001		L CALL CION	l nor	OALL CION
of Base Rate Fe	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and								
Syndicated					· ············		······································	
Exclusivity					<u> </u>		<u></u>	
Surcharge for Partially Distant	•••••							
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	0.00			Total DSEs	0.00			Total DSEs
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gro
	,				•			
		SUBSCRIBER GROU	r-SECOND			SUBSCRIBER GRO	TY-FIRST	
	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			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third Gi
	_	\$	Group		_	\$	Group	

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUD FIFTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DS	ER GROUP 0 Computat
COMMUNITY/ AREA 0 COMMUNITY/ AREA	0 9 Computat
	Computat
CALL SIGN DSE CALL SIGN DSE CALL S	
	GN DSE of
	Base Rate
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	for
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otal DSEs 0.00 Total DSEs	0.00
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	0.00
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	0.00
FIFTY-FIFTH SUBSCRIBER GROUP FIFTY-SIXTH SUBSCRIE	ER GROUP
COMMUNITY/ AREA COMMUNITY/ AREA	0
CALL SIGN DSE CALL SIGN DSE CALL S	GN DSE
otal DSEs 0.00 Total DSEs	0.00
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$	0.00
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$	0.00

0 Computatio	015474	S				e, IA)		LEGAL NAME OF OWNER MCC lowa, LLC (Fo
				TE FEES FOR EACH				
۵		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	SEVENTH	
_	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
E of Base Rate Form and Syndicated Exclusivity	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$		Gross Receipts Secon Base Rate Fee Secon	0.00	\$		·
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	0.00 JP O DSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROU	DSE DSE	FIF COMMUNITY/ AREA CALL SIGN

N. a.a.a.	of CABLE SYSTEM: t Dodge, IA) 015474							wico iowa, LLO (i
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-SECOND	H		SUBSCRIBER GRO	XTY-FIRST	
Computat	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		•		Total DSEs	0.00			Total DSEs
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	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
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	0.00 0.00	\$ I SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	XTY-THIRD	SIDCOMMUNITY/ AREA
	0.00 0.00	\$ I SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	XTY-THIRD	SIDCOMMUNITY/ AREA
	0.00 0.00	\$ I SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	XTY-THIRD	SID
	0.00 0.00	\$ I SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	XTY-THIRD	SIDCOMMUNITY/ AREA
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	0.00 0.00	\$ I SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	XTY-THIRD	SIX COMMUNITY/ AREA CALL SIGN
	0.00 UP 0 DSE	\$ I SUBSCRIBER GROU	d Group Y-FOURTH DSE	Base Rate Fee Secon SIXT COMMUNITY/ AREA CALL SIGN	0.00 UP 0 DSE	\$ SUBSCRIBER GRO	XTY-THIRD DSE	SIDE COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00 UP 0 DSE	SUBSCRIBER GROU	d Group Y-FOURTH DSE	Base Rate Fee Secon SIXT COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP 0 DSE	SUBSCRIBER GRO CALL SIGN	DSE STOUP	COMMUNITY/ AREA

Name	of CABLE SYSTEM: t Dodge, IA) 015474							
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	
9		SUBSCRIBER GROU	XTY-SIXTH	Ħ		SUBSCRIBER GRO	XTY-FIFTH	
Computati	0			COMMUNITY/ AREA	0			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			otal DSEs
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	
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	0 0	SUBSCRIBER GROU	TY-EIGHTH	SIX'	JP 0	SUBSCRIBER GROI	SEVENTH	Base Rate Fee First Gr SIXTY- COMMUNITY/ AREA
	0 0	SUBSCRIBER GROU	TY-EIGHTH	SIX'	JP 0	SUBSCRIBER GROI	SEVENTH	Base Rate Fee First Gr SIXTY- COMMUNITY/ AREA
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	DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROI	DSE	SIXTY-COMMUNITY/ AREA CALL SIGN Total DSEs

MCC Iowa, LLC (Fort Doc	BLE SYSTEM: I ge, IA)				`	015474	Name
	A: COMPUTATION (П				
	H SUBSCRIBER GRO		TI .		I SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA	·····		0	Computatio
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate Fe
					<u> </u>		and
							Syndicated
					.		Exclusivity
	···-				.		Surcharge for
							Partially
							Distant
							Stations
T	Ш	6.00	T		Ц	0.00	
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVENTY-FIRS	ST SUBSCRIBER GRO	OUP	SEVEN	ITY-SECOND	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	١		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Third Group Base Rate Fee Third Group		0.00	Total DSEs	th Group		0.00	

NI a see a	VNER OF CABLE SYSTEM: SYSTEM ID# F(Fort Dodge, IA) BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP							MCC Iowa, LLC (F
				11				
9		SUBSCRIBER GROU	Y-FOURTH	Ħ		SUBSCRIBER GRO	NTY-THIRD	
Computat	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
-	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
	JP 0	SUBSCRIBER GROU	NTY-SIXTH	SEVI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	NTY-FIFTH	SEVEN COMMUNITY/ AREA
	DSE	SUBSCRIBER GROU	DSE	SEVI COMMUNITY/ AREA	JP O DSE	SUBSCRIBER GRO	DSE DSE	SEVENCOMMUNITY/ AREA CALL SIGN Fotal DSEs
	DSE DSE O.00	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Total DSEs	DSE DSE O.00	SUBSCRIBER GROI	DSE STOUP	COMMUNITY/ AREA

Name	ABLE SYSTEM: Odge, IA) K A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP							
		BER GROUP	SUBSCRI	TE FEES FOR EAC	F BASE RA	COMPUTATION C	BLOCK A:	
9		SUBSCRIBER GROU	TY-EIGHTH	SEVE		SUBSCRIBER GRO	-SEVENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Name	015474	S						MCC lowa, LLC (Fo
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Name	FOWNER OF CABLE SYSTEM: LC (Fort Dodge, IA) BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP							
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CABLE SYSTEM: SY COdge, IA)	015474	Name
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SYSTEM ID# 015474	S						LEGAL NAME OF OWNER MCC Iowa, LLC (F
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Name	ER OF CABLE SYSTEM: Fort Dodge, IA) O15474						WICC IOWA, LLC (F	
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	TY-EIGHTH			SUBSCRIBER GRO	-SEVENTH	
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LEGAL NAME OF OWNER MCC lowa, LLC (Fo						S	015474	Name
				TE FEES FOR EACH	SUBSCR	IBER GROUP		
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COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
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Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRE	D THIRD	SUBSCRIBER GROU	Р	ONE HUNDRE	D FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
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Base Rate Fee: Add the Enter here and in block 3			ber group a	as shown in the boxes al	bove.	\$		

LEGAL NAME OF OWNER MCC Iowa, LLC (Fo						S	015474	Name
				TE FEES FOR EACH	SUBSCR	IBER GROUP		
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourtl	n Group	\$	0.00	
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Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the			iber group a	s shown in the boxes a	bove.	s		

Name								MCC Iowa, LLC (Fo
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	0.00 0.00 DSE	\$ SUBSCRIBER GROU	d Group TWELVTH DSE	Gross Receipts Seco Base Rate Fee Seco ONE HUNDRE COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROU	DSE	Base Rate Fee First Gr ONE HUNDRED E COMMUNITY/ AREA

Name	015474	SYSTEM: SYSTEM ID 01547						MCC Iowa, LLC (F
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Nonpermitted 3.75 Stations

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9		SUBSCRIBER GROUP	IGHTEENTH	ii		SUBSCRIBER GROUP	/ENTEENTH	
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LEGAL NAME OF OWNER MCC Iowa, LLC (Fo						S	YSTEM ID# 015474	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH				
	NTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-SECOND	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						_		and
								Syndicated
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Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	-	\$	0.00	Base Rate Fee Second		\$	0.00	
	ITY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	is shown in the boxes ab	ove.	\$		

LEGAL NAME OF OWN MCC lowa, LLC (Name
ONE HINDRED TO				ATE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GROU	0	COMMUNITY/ AREA		1 SUBSCRIBER GROUP	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWEN		SUBSCRIBER GROU				H SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group a	II as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER MCC Iowa, LLC (Fo			•			\$	015474	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED TWEN	ITY-NINTH	SUBSCRIBER GROUP		ii	D THIRTIETH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	מווכ	<u> </u>	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Gross Rescipts 1 list Gre	эцр		0.00	Gross Rescipts Scool	id Group	<u>*</u>	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED THIF	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIF	RTY-SECONE	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the			iber group a	s shown in the boxes a	bove.	\$		

Name	015474					e, IA)		MCC lowa, LLC (F
		BER GROUP	SUBSCRI	TE FEES FOR EAC	BASE RA			
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	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THE	JP 0	SUBSCRIBER GROU	RTY-FIFTH	COMMUNITY/ AREA
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	DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED THE COMMUNITY AREA	DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED THIF COMMUNITY/ AREA CALL SIGN
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Name	015474	SYSTEM: SYSTEM ID 015474						MCC Iowa, LLC (F
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	F BASE RA	COMPUTATION C	BLOCK A:	
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LEGAL NAME OF OWN MCC Iowa, LLC (Name
	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	FTY-THIRD	SUBSCRIBER GRO				SUBSCRIBER GRO	JP	9
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Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED F	IFTY-FIFTH	SUBSCRIBER GRO	UP	ONE HUNDRED	FIFTY-SIXTH	SUBSCRIBER GRO	JP	
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FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MCC Iowa, LLC (Fort Dodge, IA) 015474 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. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **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. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 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 Second Group ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 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** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MCC Iowa, LLC (Fort Dodge, IA) 015474 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. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **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. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH 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 Second Group FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 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** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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C	Cable Worksheet		Total amount of remittance	Nu	mber of SAs rec'd	Initials	
			Date of remittance	_ □Check	□EFT	□FILIN	G FEES
Cable ID #						Amount	Initials
Examined by	Reviewed	d by	Date examination completed	Allocati	on number		
Space A Accounting Period							
	□January 1 - June 3	0, 2017	С]July 1 - Decer	nber 31, 2017		
	☐Letter sent			☐Information re	eceived		
□Accepted			Γ	☐Phone call/Da	te/Contact		
Space B Owner							
	☐Letter sent			☐Information re	eceived		
	□Accepted		[Phone call/Da	te/Contact		
Space D Area Served							
	☐Letter sent			☐Information re	eceived		
	□Accepted		[☐Phone call/Da	te/Contact		
Space E Secondary Transission							
Service Subscribers:	☐Letter sent		☐Information received				
and Rates	□Accepted		☐ Phone call/Date/Contact				
Space G Primary Transmitters:							
Television	☐Letter sent]	Information r	eceived		
	□Accepted]	Phone call/Da	te/Contact		
Space H Primary Transmitters:							
Radio	□Accepted		Г	□ Phono call/Da	to/Contoot		

		Space I Substitute Carriage
☐ Letter sent	☐ Information received	
□Accepted	☐Phone call/Date/Contact	
		Space J Part-time Carriage Log
☑Letter sent	☐ Information received	(SA3 only)
□Accepted	Phone call/Date/Contact	
		Space K Gross Receipts
☐Letter sent	☐Information received	
Letter sent	☐Phone call/Date/Contact	
		Space L Copyright Filing and Royalty Fees
☐Royalty Fee should be	Refund request to fiscal	
☐Letter sent	☐ Information received	
□Accepted	☐Phoe call/Date/Contact	
		Space M Channels
☐Letter sent	☐Information received	
□Accepted	☐Phone call/Date/Contact	
		Space O Certification
☐Letter sent	☐Information received	
Accepted	Phone call/Date/Contact	
		Space P Statement of Gross Receipts
Letter sent	☐Information received	
□Accepted	☐Phone call/Date/Contact	
		Space Q Interest Assessment
Letter sent	☐Info/add'l fee received	
□Accepted	☐Phone call/Date/Contact	