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

Return completed workbook by email to:

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

OFFICE USE ONLY
AMOUNT
\$
ALLOCATION NUMBER

coplicsoa@copyright.gov

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

	ACCOUNTING PERIOD COVERED BY THIS STAT	EMENT:			
Accounting Period	2021/2				
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conduct of there were different owners during the accounting period, or a single statement of account and royalty fee payment covering the Check here if this is the system's first filing. If not, enter the	s the business of the cable system Ily the owner on the last day of the e entire accounting period.	accounting period should su		6343
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SY	STEM			
	Mid-Plains Telephone, LLC				
				6343 [°]	72021:
				63437	2021/2
	525 Junction Bd				
	525 Junction Rd Madison, WI 53717-2152				
	Madison, WI 53717-2152				
С					
C System	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing				
-	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing				
-	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing IDENTIFICATION OF CABLE SYSTEM:				
-	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing 1 IDENTIFICATION OF CABLE SYSTEM: TDS Telecom, Inc.				
-	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing 1 IDENTIFICATION OF CABLE SYSTEM: 1 TDS Telecom, Inc. MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number)				
-	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing 1 IDENTIFICATION OF CABLE SYSTEM: TDS Telecom, Inc. MAILING ADDRESS OF CABLE SYSTEM:				
-	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing 1 IDENTIFICATION OF CABLE SYSTEM: 1 TDS Telecom, Inc. MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number)	address of the system, if differ	ent from the address give	n in space I	B.
System	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing 1 IDENTIFICATION OF CABLE SYSTEM: 1 TDS Telecom, Inc. MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number) (City, town, state, zip code)	address of the system, if differ	ent from the address give	n in space I	В.
System	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing 1 IDENTIFICATION OF CABLE SYSTEM: 1 TDS Telecom, Inc. MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number) (City, town, state, zip code) Instructions: For complete space D instructions, see page	address of the system, if differ	ent from the address give	n in space I	В.
System D Area	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing 1 IDENTIFICATION OF CABLE SYSTEM: 1 TDS Telecom, Inc. MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number) (City, town, state, zip code) Instructions: For complete space D instructions, see page with all communities.	address of the system, if differ 1b. Identify only the frst commu	ent from the address give	n in space I	В.
System D Area Served	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing 1 IDENTIFICATION OF CABLE SYSTEM: TDS Telecom, Inc. MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number) (City, town, state, zip code) Instructions: For complete space D instructions, see page with all communities. CITY OR TOWN Middleton	address of the system, if differ 1b. Identify only the frst community STATE WI	ent from the address give	n in space I	В.
System D Area Served First	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing 1 IDENTIFICATION OF CABLE SYSTEM: TDS Telecom, Inc. MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number) (City, town, state, zip code) Instructions: For complete space D instructions, see page with all communities. CITY OR TOWN Middleton Below is a sample for reporting communities if you report	address of the system, if differ 1b. Identify only the frst community STATE WI	ent from the address give	in space I	В.
System D Area Served First Community	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing 1 IDENTIFICATION OF CABLE SYSTEM: TDS Telecom, Inc. MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number) (City, town, state, zip code) Instructions: For complete space D instructions, see page with all communities. CITY OR TOWN Middleton	address of the system, if differ 1b. Identify only the frst community STATE WI multiple channel line-ups in Spa	ent from the address give unity served below and rel	in space I	B. 1b
System D Area Served First	Madison, WI 53717-2152 INSTRUCTIONS: In line 1, give any business or trade name names already appear in space B. In line 2, give the mailing 1 IDENTIFICATION OF CABLE SYSTEM: TDS Telecom, Inc. MAILING ADDRESS OF CABLE SYSTEM: 2 (Number, street, rural route, apartment, or suite number) (City, town, state, zip code) Instructions: For complete space D instructions, see page with all communities. CITY OR TOWN Middleton Below is a sample for reporting communities if you report CITY OR TOWN (SAMPLE)	address of the system, if differ 1b. Identify only the frst community STATE WI multiple channel line-ups in Spa STATE STATE	ent from the address give unity served below and rel ace G. CH LINE UP	in space I	B. 1b

DRM SA3E. PAGE 1b.			SYSTEM ID#	1
LEGAL NAME OF OWNER OF CABLE SYSTEM:				
Mid-Plains Telephone, LLC			63437	
Instructions: List each separate community served by the cable system. A "commu in FCC rules: "a separate and distinct community or municipal entity (including uninc areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The of system identification hereafter known as the "first community." Please use it as the	orporated communitie frst community that	es within unincorpo you list will serve a	orated	D Area Served
Note: Entities and properties such as hotels, apartments, condominiums, or mobile I below the identified city or town.	nome parks should be	e reported in paren	theses	
If all communities receive the same complement of television broadcast stations (i.e. all communities with the channel line-up "A" in the appropriate column below or leave on a partially distant or partially permitted basis in the DSE Schedule, associate each designated by a number (based on your reporting from Part 9).	e the column blank. If	you report any sta	itions	
When reporting the carriage of television broadcast stations on a community-by-com channel line-up designated by an alpha-letter(s) (based on your Space G reporting) (based on your reporting from Part 9 of the DSE Schedule) in the appropriate column	and a subscriber grou			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
Middleton	WI	AA		First
Cross Plains	WI	AA		Community
				See instructions for
				additional informati on alphabetization.
				Add rows as necessa

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T	Ι	
<u>, I</u>		

Name	LEGAL NAME OF OWNER OF CABLE										SYS	TEM II 6343
	Mid-Plains Telephone, L	LC										0343
Е	SECONDARY TRANSMISSION											
-	In General: The information in sp			-		-						
Secondary	system, that is, the retransmissio about other services (including p											
Transmission		iting period (June 30 or December 31, as the case may be).										
Service: Sub-	Number of Subscribers: Both							bl	e system,	broken		
scribers and	down by categories of secondary											
Rates	each category by counting the nu separately for the particular servi Rate: Give the standard rate ch	ce at the rate	ndicate	d-not the nun	nb	per of sets	s receiving serv	/ic	ce).	-		
	unit in which it is generally billed.	-	-	-					-			
	category, but do not include disco					,			•			
	Block 1: In the left-hand block	•		•								
	systems most commonly provide											
	that applies to your system. Note categories, that person or entity s			-			-					
	subscriber who pays extra for cal											
	first set" and would be counted o							i u				
	Block 2: If your cable system h						service that are	c	different fro	om those		
	printed in block 1 (for example, ti											
	with the number of subscribers a	nd rates, in the	e right-h	and block. A t	wo	o- or three	e-word descript	io	on of the se	ervice is		
	sufficient.	DCK 1			П				BLOC	()		
		NO. OF	-		-				BLUU	NO. OF		
	CATEGORY OF SERVICE	SUBSCRIB		RATE		CATE	EGORY OF SE	R	VICE	SUBSCRIBERS		RATE
	Residential:											
	 Service to first set 		3,540	\$25/mo								
	 Service to additional set(s) 											
	 FM radio (if separate rate) 											
	Motel, hotel											
	Commercial		30	\$59.04/mo								
	Converter											
	• Residential		3,540	\$6/Mo.								
	 Non-residential 											
					_							
	SERVICES OTHER THAN SECO In General: Space F calls for rate					nect to all	your cable sys	te	em's servic	es that were		
F	not covered in space E, that is, th		,		•							
	service for a single fee. There are											
Services	furnished at cost or (2) services of											
Other Than	amount of the charge and the un		usually	billed. If any ra	ate	es are cha	arged on a vari	al	ble per-pro	gram basis,		
Secondary ransmissions:	enter only the letters "PP" in the r Block 1: Give the standard rate		ho cabl	a system for ea	ac	h of the a	nnlicable servi	~~	e lietod			
Rates	Block 2: List any services that									vere not		
nutoo	listed in block 1 and for which a s											
	brief (two- or three-word) descrip	tion and includ	le the ra	ate for each.								
		BLO	CK 1							BLOCK 2)	
	CATEGORY OF SERVICE	RATE		GORY OF SER	۲V	ICE	RATE		CATEGO	RY OF SERVIC		RATE
	Continuing Services:		Install	ation: Non-res	sic	dential						
	• Pay cable	\$0 - \$50.00	• Mo	tel, hotel								
	 Pay cable—add'l channel 		• Co	mmercial			\$0 - \$50.00					
	 Fire protection 		• Pa	y cable								
	 Burglar protection 			y cable-add'l cl	ha	annel						
	Installation: Residential			e protection								
	 First set 	\$0-\$50.00		rglar protection	۱							
	 Additional set(s) 	\$0-\$50.00		services:								
	• FM radio (if separate rate)			connect			\$0-\$25.00					
	Converter			sconnect								
		1	• • • • •	tlet relocation			19.98-39.96					
				ive to new add			19.90-39.90					

ACCOUNTING PERIOD: 2021/2

LEGAL NAME OF OW Mid-Plains Te					SYSTEM ID# 63437	Name
PRIMARY TRANSMIT	TERS: TELEVISIO	N				
In General: In space	G, identify every	television sta	· ·		and low power television stations)	<u>^</u>
		-			l only on a part-time basis under	G
•					in network programs [sections nd (2) certain stations carried on a	Primary
substitute program b				n(c)(z) and (+))], a		Transmitters:
				carried by your ca	able system on a substitute program	Television
basis under specifc l Do not list the statio				e Special Stateme	nt and Program Log)—if the	
station was carrie	d only on a subst	itute basis.				
basis. For further	information conc				te basis and also on some other the general instructions located	
in the paper SA3 Column 1: List ea		sign. Do not re	eport origination	program services	such as HBO, ESPN, etc. Identify	
					on. For example, report multi-	
ast stream as "WE⊺ VETA-simulcast).	A-2". Simulcast s	streams must I	be reported in co	olumn 1 (list each	stream separately; for example	
	he channel numb	er the FCC ha	as assigned to th	ne television statio	on for broadcasting over-the-air in	
•			nnel 4 in Washi	ngton, D.C. This r	nay be different from the channel	
on which your cable Column 3: Indica			ation is a networ	k station, an inde	pendent station, or a noncommercial	
educational station, l	by entering the le	tter "N" (for ne	etwork), "N-M" (f	or network multica	ist), "I" (for independent), "I-M"	
for independent mul For the meaning of t	, · · · ·		, · ·	•	nmercial educational multicast). e paper SA3 form	
					s". If not, enter "No". For an ex-	
column 5: If you						
					ating the basis on which your ering "LAC" if your cable system	
carried the distant st						
					payment because it is the subject	
-				•	tem or an association representing / transmitter, enter the designa-	
tion "E" (exempt). Fo	r simulcasts, also	enter "E". If y	ou carried the c	hannel on any oth	er basis, enter "O." For a further	
					I in the paper SA3 form.	
					to which the station is licensed by the which the station is identifed.	
Note: If you are utiliz						
-		•	EL LINE-UP			1
		OTIAN		~~		
						-
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	-
1. CALL SIGN	CHANNEL	OF	4. DISTANT? (Yes or No)	CARRIAGE	6. LOCATION OF STATION	-
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)			-
SIGN	CHANNEL NUMBER 27.1	OF STATION N	(Yes or No)	CARRIAGE	Madison, WI	-
SIGN WKOW WKOW-DT2	CHANNEL NUMBER 27.1 27.2	OF STATION N N-M	(Yes or No) No No	CARRIAGE	Madison, WI Madison, WI	See instructions for
SIGN WKOW WKOW-DT2	CHANNEL NUMBER 27.1	OF STATION N	(Yes or No)	CARRIAGE	Madison, WI	See instructions for additional information on alphabetization.
SIGN WKOW WKOW-DT2 WKOW-DT3	CHANNEL NUMBER 27.1 27.2	OF STATION N N-M	(Yes or No) No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4	CHANNEL NUMBER 27.1 27.2 27.3	OF STATION N-M N-M	(Yes or No) No No No No	CARRIAGE	Madison, WI Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5	OF STATION N-M N-M N-M	(Yes or No) No No No	CARRIAGE	Madison, WI Madison, WI Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1	OF STATION N-M N-M N-M N-M N	(Yes or No) No No No No No	CARRIAGE	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2	OF STATION N-M N-M N-M N-M N-M	(Yes or No) No No No No No No	CARRIAGE	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.2 3.3	OF STATION N-M N-M N-M N-M N-M N-M	(Yes or No) No No No No No No No	CARRIAGE	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2	OF STATION N-M N-M N-M N-M N-M	(Yes or No) No No No No No No	CARRIAGE	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3 WMSN	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.2 3.3	OF STATION N-M N-M N-M N-M N-M N-M	(Yes or No) No No No No No No No	CARRIAGE	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT2 WISC-DT3 WMSN	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M	(Yes or No) No No No No No No No	CARRIAGE	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M	(Yes or No) No No No No No No No No	CARRIAGE	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M	(Yes or No) No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M	(Yes or No) No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT3 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT3 WMSN-DT4 WMTV-DT2	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT3 WMSN-DT4 WMSN-DT4 WMTV-DT2 WMTV-DT2	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMSN-DT4 WMTV-DT2 WMTV-DT2	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV-DT2 WMTV-DT3 WMTV-DT3	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV-DT2 WMTV-DT3 WMTV-DT4 WMTV-DT4	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV-DT3 WMTV-DT3 WMTV-DT3 WMTV-DT5 WMTV-DT6 WHA	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV-DT3 WMTV-DT3 WMTV-DT3 WMTV-DT5 WMTV-DT6 WHA-DT2	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 15.6 21.1 21.2	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV-DT3 WMTV-DT3 WMTV-DT3 WMTV-DT4 WMTV-DT4 WMTV-DT5 WMTV-DT6 WHA-DT2 WHA-DT3	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 15.6 21.1 21.2 21.3	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMSN-DT4 WMTV-DT2 WMTV-DT3 WMTV-DT3 WMTV-DT4 WMTV-DT5 WMTV-DT6 WHA-DT2 WHA-DT3 WHA-DT3 WHA-DT4	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 15.6 21.1 21.2 21.3 21.4	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV-DT3 WMTV-DT3 WMTV-DT4 WMTV-DT5 WMTV-DT5 WMTV-DT6 WHA-DT2 WHA-DT3 WHA-DT3 WHA-DT4	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 15.6 21.1 21.2 21.3	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV-DT3 WMTV-DT3 WMTV-DT4 WMTV-DT5 WMTV-DT5 WMTV-DT6 WHA-DT2 WHA-DT3 WHA-DT3 WHA-DT4	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 15.6 21.1 21.2 21.3 21.4	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT3 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV-DT3 WMTV-DT2 WMTV-DT4 WMTV-DT4 WMTV-DT5 WMTV-DT5 WMTV-DT6 WHA-DT2 WHA-DT3 WHA-DT3 WHA-DT4	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 15.6 21.1 21.2 21.3 21.4	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMSN-DT4 WMTV-DT2 WMTV-DT3 WMTV-DT3 WMTV-DT4 WMTV-DT5 WMTV-DT6 WHA-DT2 WHA-DT3 WHA-DT3 WHA-DT4	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 15.6 21.1 21.2 21.3 21.4	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT2	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 15.6 21.1 21.2 21.3 21.4	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMSN-DT4 WMTV-DT2 WMTV-DT3 WMTV-DT3 WMTV-DT4 WMTV-DT5 WMTV-DT6 WHA-DT2 WHA-DT3 WHA-DT3 WHA-DT4	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 15.6 21.1 21.2 21.3 21.4	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information
SIGN WKOW-DT2 WKOW-DT3 WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT3 WMSN-DT4 WMSN-DT4 WMTV-DT2 WMTV-DT3 WMTV-DT3 WMTV-DT4 WMTV-DT5 WMTV-DT6 WHA-DT2 WHA-DT3 WHA-DT3 WHA-DT4	CHANNEL NUMBER 27.1 27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 15.6 21.1 21.2 21.3 21.4	OF STATION N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	(Yes or No) No No No No No No No No No No No No No	CARRIAGE	Madison, WI Madison, WI	additional information

ACCOUNTING PERIOD: 2021/2

FORM SA3E. PAGE 3.

LEGAL NAME OF OW		STEM:			SYS	TEM ID#	
Mid-Plains Te						63437	Name
PRIMARY TRANSMIT	TERS: TELEVISIO	N					
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program b	e system during th ations in effect or 76.61(e)(2) and (- asis, as explaine	ne accounting n June 24, 198 4), or 76.63 (ro d in the next p	period, except (81, permitting the eferring to 76.61 paragraph.	1) stations carrie e carriage of certa (e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a		G Primary Transmitters:
Substitute Basis basis under specifc F Do not list the static station was carrie List the station here basis. For further in the paper SA3 Column 1: List ea each multicast strear cast stream as "WET WETA-simulcast). Column 2: Give t ts community of licer on which your cable Column 3: Indica educational station, b for independent mul- for the meaning of the Column 4: If the st colanen 5: If you cable system carried carried the distant stat For the retransmise of a written agreement the cable system and cion "E" (exempt). Fo explanation of these Column 6: Give t	Stations: With a FCC rules, regula on here in space d only on a subse- d only on a subse- and also in spa- information conc form. ach station's call m associated with FA-2". Simulcast he channel numb nse. For example system carried th te in each case w by entering the le ticast), "E" (for no hese terms, see p station is outside vice area, see pp have entered "Ye the distant static ation on a part-tin ssion of a distant nt entered into on d a primary transi- r simulcasts, also three categories he location of ea canadian statio	respect to any titions, or authors, or authors, or authors, or authors, or authors, ititute basis. Ince I, if the state erning substitutes sign. Do not r a station accord streams must ber the FCC h bay WRC is Char e station. Whether the state ther "N" (for ne concommercial bage (v) of the the local serve age (v) of the conclumnt and basis becar multicast stree nor before Jum mitter or an as openter "E". If y see page (v) ch station. Foo ns, if any, give	distant stations orizations: it in space I (the tion was carried ute basis station eport origination cording to its ove be reported in c as assigned to tt annel 4 in Washi ation is a networ etwork), "N-M" (fr educational), or general instruc- ice area, (i.e. "d general instruc- general ins	e Special Stateme both on a substit is, see page (v) o program service er-the-air designa column 1 (list eacl he television stati ington, D.C. This k station, an inde or network multica "E-M" (for nonco tions located in the splete column 5, s d. Indicate by ent ctivated channel or ubject to a royalty ween a cable sys senting the primal thannel on any ot pstructions locate ist the community	s". If not, enter "No". For an ex- epaper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by t which the station is identifed.	al	Television
		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		
WHA	21.1	Е	No		Madison, WI		
WHA-DT2	21.2	E-M	No		Madison, WI		
WHA-DT3	21.3	E-M	No		Madison, WI		
WHA-DT4	21.4	E-M	No		Madison, WI		
WIFS	57.1		No		Janesville, WI		
		······					
		· · · · · · · · · · · · · · · · · · ·					

Name	LEGAL NAME OF C			М:				SYSTEM ID# 63437
H Primary Transmitters: Radio	all-band basis w Special Instruct receivable if (1) on the basis of th	t every radio st whose signals w c tions Concer it is carried by monitoring, to l	tation ca were "ge r ning All r the syst be receiv	rried on a separate and discret nerally receivable" by your cab -Band FM Carriage: Under Co tem whenever it is received at the ved at the headend, with the sy Copyright Office regulations or	le system during opyright Office re the system's hea rstem's FM anten	the accounting gulations, and dend, and (2) na, during cer	g period FM sign it can be tain stat	al is generally e expected, ed intervals.
	Column 2: S Column 3: If signal, indicate Column 4: G	dentify the call state whether th the radio station this by placing Sive the station	sign of e ne station on's sigr a check 's locatio	each station carried. n is AM or FM. nal was electronically processe mark in the "S/D" column. on (the community to which the he community with which the s	station is license	ed by the FCC		
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
			S/D	LOGATION OF STATION	UALL SIGN		3/0	LOGATION OF STATION
	N/A							
							<u> </u>	
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		1			[t	

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2021/2
LEGAL NAME OF OWNER OF	CABLE SYST	EM:				S	SYSTEM ID#	
Mid-Plains Telephone,	LLC						63437	Name
SUBSTITUTE CARRIAGI	E: SPECIA	L STATEMEI	NT AND PROGRAM LOC	6				
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or a	authorizations.	For a further	∎ Substitute
1. SPECIAL STATEMEN				general met		outou in the pu		Carriage:
During the accounting per broadcast by a distant state	riod, did you			is, any nonne	etwork tele		No	Special Statement and Program Log
Note: If your answer is "No log in block 2.	", leave the	rest of this pa	ge blank. If your answer is	"Yes," you mu	ust comple			
2. LOG OF SUBSTITUTE	E PROGRA	MS						
In General: List each subs				wherever pos	ssible, if th	eir meaning is	i	
clear. If you need more spa			ial pages. iision program (substitute p	program) that	during the	accounting		
period, was broadcast by a	distant stat	ion and that yo	our cable system substitute	d for the prog	gramming	of another stat	tion	
under certain FCC rules, re	•							
SA3 form for futher informa titles, for example, "I Love I				r "basketball"	. List spec	sific program		
			r "Yes." Otherwise enter "N	lo."				
			asting the substitute progra			500		
the case of Mexican or Car			ne community to which the community with which the			ie FCC or, in		
			tem carried the substitute			, with the mon	th	
first. Example: for May 7 giv								
to the nearest five minutes.			gram was carried by your ied by a system from 6:01:				У	
stated as "6:00–6:30 p.m."		a program oam		10 p.m. to 0.2	20.00 p.m.			
			was substituted for progra				t	
to delete under FCC rules a gram was substituted for pr								
effect on October 19, 1976		that your oyou				ogulatione m		
s	UBSTITUT	E PROGRAM	1		EN SUBS		7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES — TO	FOR DELETION	
N/A						_		
	1					_		
	+							
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#								
Nume	Mid-Plains T	elephone, L	LC						6343
J Part-Time Carriage Log	 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m 12:00 p.m." 								
			DATE	ES AND HOURS	OF F	PART-TIME CAR	RIAGE		
	CALL SIGN	WHEN	I CARRIAGE OCC			CALL SIGN	WHEN	I CARRIAGE O	
	0/122 01011	DATE	HOU FROM	JRS TO		0,122 0.011	DATE	H FROM	OURS
	N/A			-	1				_
			-	_					_
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FORM	SA3E. PAGE 7.		
LEGA	IL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Mid	-Plains Telephone, LLC	63437	
Inst all a (as i page	DSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount y 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 core e (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	dary transmission service	K Gross Receipts
 Instru Con Con If yo feet If yo 	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: uplete block 1, showing your minimum fee. uplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the amor from block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable part ompanying this form and attach the schedule to your statement of account.		L Copyright Royalty Fee
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be 6 k 3 below.	entered on line 1 of	
If particular departments	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be en low.	tered on line 2 in block	
▶ If pa	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	d be entered on line	
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more a least the minimum fee, regardless of whether they carried any distant stations. This fee i 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.	\$ 11,332.11	
Block 2	 space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. X No—Leave block 3 below blank and complete the DSE schedule. 	?	
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	0.00	
	Line 3. Add lines 1 and 2 and enter here	\$-	
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. 	\$ 11,332.11 0.00	Cable systems submitting additional deposits under
	Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact
	Line 4. FILING FEE	\$ 725.00	the Licensing additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here EFET Traces # er TRANSACTION ID #	\$ 12,057.11	appropriate form for submitting the additional fees.
	EFT Trace # or TRANSACTION ID # Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Se general instructions located in the paper SA3 form and the Excel instructions tak		

1/2

ACCOUNTING PERIO	JU: 2021/2	FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Mid-Plains Telephone, LLC	63437
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast s to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	tations
Channels	1. Enter the total number of channels on which the cable system carried television broadcast stations	23
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	154
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Be Contacted for Further Information	Name Stephanie Weber Telephone	608) 664-4721
	Address 525 Junction Rd (Number, street, rural route, apartment, or suite number)	
	Madison, WI 53717-2152 (City. town, state, zip)	
	Email Finance@tdstelecom.com Fax (optional	
O Certifcation	 CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regula I, the undersigned, hereby certify that (Check one, <i>but only one</i>, 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; of (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system 	or
	 in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner 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 he are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. 	
Privacy Act Notice:	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)] Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 1001(1986) Image: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (feed to collect the personally identifying information	ibility settings.

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.

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

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 (hereaf-ter 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, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.

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

5) In the case of a station carried prior to June 25, 1981, on a part-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.

DSE SCHEDULE. PAGE 11.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE SCHEDULE

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

· If none of the stations were partially distant, calculate your base rate fee according to the following rates-for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable. First DSE 1.064% of gross receipts

Each of the second, third, and fourth DSEs 0.701% of gross receipts 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

If any of the stations were partially distant:

The fifth and each additional DSF

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.

5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.

6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.

7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

What to Do If You Need More Space on the DSE Schedule. There are no printed continuation sheets for the schedule. In most cases, the blanks provided should be large enough for the necessary information. If you need more space in a particular part, make a photocopy of the page in guestion (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.

COMPUTATION OF COPYRIGHT ROYALTY FEE FOR CABLE SYSTEM CARRYING PARTIALLY DISTANT STATIONS Distant Stations Carried Identification of Subscriber Groups In most cases under current FCC STATION DSF CITY OUTSIDE LOCAL GROSS RECEIPTS rules, all of Fairvale would be within A (independent) 1.0 SERVICE AREA OF FROM SUBSCRIBERS the local service area of both stations B (independent) 1.0 Santa Rosa Stations A, B, C, D ,E \$310,000.00 Stations A and C 0.083 Rapid City 100,000.00 A and C and all of Rapid City and Bo-C (part-time) 0.139 Bodega Bay Stations A and C 70,000.00 dega Bay would be within the local D (part-time) Fairvale 120,000.00 service areas of stations B, D, and E. E (network) 0.25 Stations B, D, and E TOTAL DSEs 2.472 TOTAL GROSS RECEIPTS \$600,000.00 Minimum Fee Total Gross Receipts \$600.000.00 Santa Rosa x .01064 Stations A and C 35 mile zone \$6,384.00 First Subscriber Group Second Subscriber Group Third Subscriber Group (Santa Rosa) (Rapid City and Bodega Bay) (Fairvale) Fairvale Gross receipts \$310,000.00 Gross receipts \$170,000.00 Gross receipts \$120,000.00 Rapid City 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 Bodega 327.23 \$310,000 x .00701 x 1.472 = 3,198.80 \$170,000 x .00701 x .083 = 98.91 \$120,000 x .00701 x .389 = Bav \$6,497.20 \$1,604.03 Base rate fee Base rate fee \$1.907.71 Base rate fee Stations B, D,

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)

EXAMPLE:

and E

35 mile zone

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#								
1	Mid-Plains Telephone, LLC 63437								
	 Add the DSEs of each station. 	SUM OF DSEs OF CATEGORY "O" STATIONS: Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule. 0.00							
2 Computation of DSEs for	nstructions: n the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 f space G (page 3). n the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- nercial educational station, give the DSE as ".25."								
Category "O"			CATEGORY "O" STATION	1					
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
Add rows as									
necessary. Remember to copy all formula into new rows.									

		ТТ	 1
 <mark></mark> ll		L	

Name	LEGAL NAME OF OWN	NER OF CABLE SYSTEM: ephone, LLC						DSE SCHEDU S	63437
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: F figure should con Column 3: F Column 4: D be carried out at Column 5: F give the type-val Column 6: M	he call sign of all distan for each station, give th rrespond with the inform for each station, give th Divide the figure in colur least to the third decim for each independent st	e number of hours nation given in spa e total number of f nn 2 by the figure al point. This is the ation, give the "typ umn 4 by the figure	your cable system ice J. Calculate only nours that the statio in column 3, and give "basis of carriage be-value" as "1.0." F	carried the stati or one DSE for ea n broadcast ove ve the result in d value" for the st for each network	on during the a ach station. In the air during lecimals in colu ation. < or noncomme column 6. Rou	the accounti mn 4. This fig rcial education nd to no less	ing period. gure must onal station, s than the	
Capacity		C	CATEGORY LA	C STATIONS:	COMPUTAT	ION OF DSE	s		
	1. CALL SIGN	2. NUMBER OF HOU CARRIE SYSTEM	RS D BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OI CARRIAC VALUE		5. TYPE VALUE	6. DS	ε
	N/A		÷			x		=	
			÷ ÷			x x		=	
			÷			x		=	
			÷			x		=	
			÷ ÷			x x		=	
			÷			x		=	
4 Computation of DSEs for Substitute- Basis Stations	Was carried by tions in effect Broadcast one space I). Column 2: Foi at your option. Th Column 3: En Column 4: Div	he call sign of each stat y your system in substit on October 19, 1976 (a or more live, nonnetwo r each station give the r is figure should corresp ter the number of days vide the figure in columr is is the station's DSE (I	ution for a program s shown by the let rk programs during number of live, nor bond with the infor ond with the infor in the calendar yea a 2 by the figure in For more informati	n that your system v ter "P" in column 7 that optional carriag metwork programs mation in space I. ar: 365, except in a column 3, and give on on rounding, see	vas permitted to of space I); and ge (as shown by t carried in substi leap year. the result in col a page (viii) of th	delete under F he word "Yes" ir tution for progr umn 4. Round te general instr	CC rules and a column 2 of ams that wer to no less tha uctions in the	re deleted an the third	ı
				SIS STATION	1	1			
	1. CALL 2 SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUME OF PROC	BER GRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷ +		=			÷ ÷		=
		÷					÷		Ē
		÷		=			÷		=
		÷ +					÷ ÷		=
	Add the DSEs of	F SUBSTITUTE-BASIS each station. here and in line 3 of pa		e,	Þ		0.00		
5 Total Number of DSEs	number of DSEs a 1. Number of	OF DSEs: Give the amo pplicable to your system. DSEs from part 2 ● DSEs from part 3 ●		s in parts 2, 3, and 4	of this schedule	and add them t	o provide the	total 0.00 0.00	
U DOES		DSEs from part 4 ●				►		0.00	
	TOTAL NUMBER	OF DSEs					>		0.00

LEGAL NAME OF O	WNER OF CABLE S	YSTEM:					S	YSTEM ID#	
Mid-Plains Tel	ephone, LLC							63437	Name
In block A: • If your answer if '	ck A must be comp "Yes," leave the rei		art 6 and part 7	of the DSE schedu	ule blank and	complete part	8, (page 16) of the	9	6
schedule.If your answer if '	 If your answer if "No," complete blocks B and C below. 								
				FELEVISION M	ARKETS				Computation of
	Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in effect on June 24, 1981?							3.75 Fee	
Yes—Com	plete part 8 of the	schedule—D	O NOT COMP	LETE THE REMAII	NDER OF PA	RT 6 AND 7.			
X No—Comp	olete blocks B and	C below.							
		BLOO	CK B: CARF	RIAGE OF PERM	/ITTED DS	Es			
Column 1: CALL SIGN	List the dan signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to dany							-	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica	les and regul ed pursuant to on as defined al educationa	ations cited be o the FCC mar in 76.5(kk) (7 I station [76.55	sis on which you ca elow pertain to thos ket quota rules [76 6.59(d)(1), 76.61(e) 9(c), 76.61(d), 76.6 raph regarding sub	e in effect on .57, 76.59(b),)(1), 76.63(a) 3(a) referring	June 24, 1981 76.61(b)(c), 70 referring to 76 to 76.61(d)]	6.63(a) referring to .61(e)(1))	
		ant to individu viously carrie IHF station wi	al waiver of F d on a part-tim ithin grade-B c	e or substitute basi ontour, [76.59(d)(5			rring to 76.61(e)(5))]	
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			rksheet on page 1	4 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								0.00	
		E	BLOCK C: CC	MPUTATION OF	- 3.75 FEE				
Line 1: Enter the	total number of [DSEs from p	oart 5 of this s	chedule				-	
Line 2: Enter the	sum of permitted	DSEs from	l block B abo	ve				-	
Line 3: Subtract line 2 from line 1. This is the total number of DSEs subject to the 3.75 rate. (If zero, leave lines 4–7 blank and proceed to part 7 of this schedule) 0.00									
Line 4: Enter gro	ss receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter sur	n here						partially permited/ partially
Line 6: Enter tota	al number of DSE	s from line 3	3				Х	-	nonpermitted carriage? If yes, see part
									9 instructions.
Line 7: Multiply li	ne 6 by line 5 and	d enter here	and on line 2	, block 3, space I	_ (page 7)			0.00	

DSE SCHEDULE. PAGE 13.

						DSE SCH	EDULE. PAGE 14.	
	LEGAL NAME OF OWN	ER OF CABLE SYSTEM	1			9	SYSTEM ID#	
Name	Mid-Plains Tele	phone, LLC					63437	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	putating 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. e DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Time and ostitute Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections							
			1	RIED ON A PART-TIME A				
	1. CALL	2. PRIOR	3. ACCOUNTING	4. BASIS OF	5. PRESEN	NT 6. P	PERMITTED	
	SIGN	DSE	PERIOD	CARRIAGE	DSE		DSE	
7	Instructions: Block A	must be completed.						
1	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 ar	nd C blank and complete	part 8 of the DSE schedul	е.			
Syndicated				R TELEVISION MARK				
-			BLUCK A. WAJUR					
Exclusivity	la anno antian af tha a		400			ffe et luce 04 400	10	
Surcharge	 Is any portion of the c 	able system within a top	100 major television mar	ket as defned by section 76	5 of FCC rules in e	mect June 24, 198	17	
	Yes—Complete	blocks B and C .		X No—Proceed t	o part 8			
	BLOCK B. C	arriage of VHF/Grade	B Contour Stations	BLO	CK C: Computation	of Exempt DSEs		
	BLOOK B. C	anage of viti /Orade	D Contour Otations	BLO	or o. computation	of Exempt DOES		
		block B of part 6 the pr		Was any station liste				
		on that places a grade	B contour, in whole	nity served by the ca	, ,	March 31, 1972?	(refer	
	or in part, over the cat	ble system?		to former FCC rule 7	5.159)			
	Yes—List each st	ation below with its appro	priate permitted DSE	Yes—List each s	station below with its a	appropriate permitte	ed DSE	
	X No-Enter zero a	nd proceed to part 8.		X No—Enter zero	and proceed to part 8			
	CALL SIGN	DSE CA	LL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				1				
				1				
		 			** }			
		 			<mark></mark>		·	
					<mark> </mark>			
					<mark> </mark>			
		тот	AL DSEs 0.00	,∏		TOTAL DSEs	0.00	
		101	0.00	-	L		0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC	SYSTEM ID# 63437	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section	Enter the amount of gross receipts from space K (page 7)	1,065,047.78	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? 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 is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	E	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	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)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

ACCOUNTING PERIOD: 2021/2

		DSE SCHEDULE. PAGE 16.
Name	LEGAL NAM	IE OF OWNER OF CABLE SYSTEM: SYSTEM: SYSTEM ID#
	I	Mid-Plains Telephone, LLC 63437
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)
Surcharge		C. Multiply line B by 3.000 and enter here.
		D. Enter 0.00089 of gross receipts (the amount in section 1)
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here
		F. Multiply line D by line E and enter here
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)
		Syndicated Exclusivity Surcharge
	Instruc	tions:
0		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part
8		checked "Yes," use the total number of DSEs from part 5.
	• In blo	ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.
Computation	• If you	r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.
of	-	r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below
Base Rate Fee	blank	
		s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers
		cated within that station's local service area and others were located outside that area. For the definition of a station's "local a area," see page (v) of the general instructions.
	361 1106	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS
	Didu	
		our 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 following sections.
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE
	1	Enter the amount of gross receipts from space K (page 7)
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.
	2	(If block A of part 6 was checked "Yes,"
		use the total number of DSEs from part 5.)
	Section	
	3	If the figure in section 2 is 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)▶ <u>\$ 7,465.98</u>
		C. Subtract 1.000 from total DSEs
		(the figure in section 2) and enter here
		D. Multiply line B by line C and enter here
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)
		Base Rate Fee

DSE SCHEDULE. PAGE 17.

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Nama				
Mid-P	lains Telephone, LLC 63437	Name				
Continu	If the figure in section 2 is more than 4 000, compute your base rate fee bare and loave section 2 black					
Section 4	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.	•				
т	A. Enter 0.01064 of gross receipts	8				
	(the amount in section 1)					
	B. Enter 0.00701 of gross receipts					
	(the amount in section 1) 5	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					
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall					
Space	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in G.	9				
•	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude					
receipt	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this	Computation of				
exclusi	on, you must:	Base Rate Fee				
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and Syndicated				
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity				
	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge				
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must	for Partially				
also co	mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However,	Distant				
if your (cable system is wholly located outside all major television markets, complete block A only.	Stations, and for Partially				
	Identify a Subscriber Group for Partially Distant Stations	Permitted				
-	For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Stations				
	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located					
	the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by					
the san	ne token, the station is distant to the subscriber.)					
-	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each					
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.					
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber						
groups						
In each	section:					
 Identi 	fy the communities/areas represented by each subscriber group.					
	he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the bers in the group.					
• lf:	bera in the group.					
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and					
	s schedule; or,					
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.					
• Add tl	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.					
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions					
	paper SA3 form.					
	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding					
DSEs f	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your calculations on the form.					

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: S				
Name	Mid-Plains Telephone, LLC	6343			
	Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals				
	Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these				
	subscriber groups may be partially distant.				
	Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant				
	signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by				
	.0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported				
	for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant				
	signals from step 1 that is subject to this surcharge.				
	Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams				
	Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from				
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate				
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement				
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary				
	transmitter or an association representing the primary transmitter.				

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		11					
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 Sec	ond Group	\$	0.00
	THIRD	SUBSCRIBER GRO			FOURTH	H SUBSCRIBER GROU	ID
OMMUNITY/ AREA		SOBSCRIBER GRO	0	COMMUNITY/ ARE		T SOBSCRIBER GROU	0
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otal DSEs			0.00	Total DSEs			0.00
Gross Receipts Third	Group	\$	\$ 0.00		irth Group	\$	0.00
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Base Rate Fee Third Group		\$	0.00	Base Rate Fee Fourth Group		\$	0.00
				11			
ase Rate Fee: Add	the base rat	e fees for each subso	criber aroun a	s shown in the boxes	above.		
inter here and in blo						\$	0.00