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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
02/16/22	\$ 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	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting the covering the entire accounting the covering the system's first filing. If not, enter the system's ID in	es of the cable system on the last day of the unting period.	m. e accounting period should sub		7778					
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM									
	Midcontinent Communications									
				777	820212					
				7778	2021/2					
	PO Box 5040 Sioux Falls, SD 57117-5040									
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	n in space	В.					
System	1 DENTIFICATION OF CABLE SYSTEM: Aberdeen, SD									
	MAILING ADDRESS OF CABLE SYSTEM:									
	PO Box 5040 (Number, street, rural route, apartment, or suite number)									
	Sioux Falls, SD 57117-5040									
	(City, town, state, zip code)									
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and reli	st on page	1b					
Area Served	with all communities.	lo-1								
First	CITY OR TOWN Aberdeen	STATE SD								
Community										
	Below is a sample for reporting communities if you report multiple cha	STATE	CH LINE UP	SUE	3 GRP#					
Samuel -	Alda	MD	Α	- 0.2	1					
Sample	Alliance	MD	В		2					
	Gering	MD	В		3					

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

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 7778 **Midcontinent Communications** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN CH LINE UP SUB GRP# STATE **Aberdeen** SD AA 1 **First Bath** SD AA 1 Community **Bristol** SD AA 1 **Doland** SD AA 1 **Frederick** SD AA 1 **Ipswich** SD 1 AA See instructions for Mina SD AA 1 additional information on alphabetization. 1 **Prairiewood** SD AA Redfield SD AA 1 SD 1 Roslyn AA 1 Warner SD AA Add rows as necessary. 1 Waubay SD AA SD 1 Webster AA **Bowdle** SD **AB** SD Java **AB** 2 Roscoe SD AB 2 Selby SD AC 3 3 Mobridge SD AC

П		1
П		
П	•••••	
П		
П		
П		
П		
П		
П		
П		
П		
П		
П		

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:

Midcontinent Communications

7778

E

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			BL	OC	K 2		
	NO. OF					NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	CATEGORY OF SERVICE		SUBSCRIBERS		RATE
Residential:								
 Service to first set 	6,317	\$	22.95	High Def Converter		6,279	\$	3.00
 Service to additional set(s) 				Hospitals		463	\$	5.00
 FM radio (if separate rate) 				Nursing Homes		722	\$	7.00
Motel, hotel				Business Accounts		314	\$	22.95
Commercial	918	\$	69.95					
Converter								
 Residential 	8,571	\$	3.00					
 Non-residential 								
		1					I	

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.

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 7778 **Midcontinent Communications** PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located 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 3. TYPE 2. B'CAST 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION SIGN **CHANNEL** OF (Yes or No) **CARRIAGE** NUMBER STATION (If Distant) KSFY-DT 13 N No SIOUX FALLS, SD (ABC) **KDLO-DT** 3 No FLORENCE, SD (CBS) N See instructions for KDLO-DT2 3.2 I-M No FLORENCE, SD (MNT-HD) additional information on alphabetization. KDLT-DT 46.1 N No SIOUX FALLS, SD (NBC) **KDLT-DT3** 46.3 I-M No SIOUX FALLS, SD (ANTENNA) **KDSD-DT** 17 Ε No ABERDEEN, SD (PBS) KDSD-DT2 17.2 E-M No ABERDEEN, SD (PBS WORLD) KDSD-DT3 17.3 E-M ABERDEEN, SD (PBS CREATE) No KDSD-DT4 17.4 E-M No ABERDEEN, SD (PBS KIDS) **KELO-DT3** SIOUX FALLS, SD(WEATHER) 11.3 N-M No KSFY-DT2 I-M SIOUX FALLS, SD (CW) 13.2 No I-M SIOUX FALLS, SD (ME TV) KSFY-DT3 13.3 No No KTTM-DT2 12.2 I-M No **HURON, SD (THIS TV)** KWSD-DT 26.1 SIOUX FALLS, SD I No **KDLT-DT2** 46.2 Τ SIOUX FALLS, SD (FOX) No KDLT-DT4 46.4 I-M SIOUX FALLS, SD (COZI TV) No KTTM-DT1 12.1 T **HURON, SD (TCT)** No

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Midcontinent Communications	7778	Name

PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AB	_
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KSFY-DT	13	N	No		SIOUX FALLS, SD (ABC)
KDLO-DT	3	N	No		FLORENCE, SD (CBS)
KDLO-DT2	3.2	I-M	No		FLORENCE,SD (MNT-HD)
KDLT-DT	46.1	N	No		SIOUX FALLS, SD (NBC)
KDLT-DT2	46.2	I	No		SIOUX FALLS, SD (FOX)
KQSD-DT	11	Е	No		LOWRY, SD (PBS)
KQSD-DT2	11.2	E-M	No		LOWRY, SD (PBS WORLD)
KQSD-DT3	11.3	E-M	No		LOWRY, SD (PBS CREATE)
KQSD-DT4	11.4	Е-М	No		LOWRY, SD (PBS KIDS)
KELO-DT3	11.3	N-M	No		SIOUX FALLS, SD(WEATHER)
KSFY-DT2	13.2	I-M	No		SIOUX FALLS, SD (CW)
KSFY-DT3	13.3	I-M	No		SIOUX FALLS, SD (ME TV)
			No		
KTTM-DT2	12.2	I-M	No		HURON, SD (THIS TV)
KWSD-DT	26.1	I	NO		SIOUX FALLS, SD
KDLT-DT3	46.3	I-M	No		SIOUX FALLS, SD (ANTENNA)
KDLT-DT4	46.4	I-M	No		SIOUX FALLS, SD (COZI TV)
KTTM-DT1	12.1	I	No		HURON, SD (TCT)

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Midcontinent Communications	7778	Name

PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AC	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KSFY-DT	13	N	No		SIOUX FALLS, SD (ABC)
KDLO-DT	3	N	No		FLORENCE, SD (CBS)
KDLO-DT2	3.2	I-M	No		FLORENCE,SD (MNT-HD)
KDLT-DT	46.1	N	No		SIOUX FALLS, SD (NBC)
KDLT-DT2	46.2	I	No		SIOUX FALLS, SD (FOX)
KQSD-DT	11	Е	No		LOWRY, SD (PBS)
KQSD-DT2	11.2	E-M	No		LOWRY, SD (PBS WORLD)
KQSD-DT3	11.3	E-M	No		LOWRY, SD (PBS CREATE)
KQSD-DT4	11.4	E-M	No		LOWRY, SD (PBS KIDS)
KELO-DT3	11.3	N-M	No		SIOUX FALLS, SD(WEATHER)
KFYR-DT	31	N	No		BISMARCK, ND (NBC)
KSFY-DT2	13.2	I-M	No		SIOUX FALLS, SD (CW)
KSFY-DT3	13.3	I-M	No		SIOUX FALLS, SD (ME TV)
KDLT-DT4	46.4	I-M	No		SIOUX FALLS, SD (COZI TV)
KTTM-DT2	12.2	I-M	No		HURON, SD (THIS TV)
KXMB-DT	12	N	No		BISMARCK, ND (CBS)
KWSD-DT	26.1	I	No		SIOUX FALLS, SD
KDLT-DT3	46.3	I-M	No		SIOUX FALLS, SD (ANTENNA)

G

Primary Transmitters: Television

Midcontinent Communications PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59f()(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 multicas	Midcontinent Communications PRIMARY TRANSMITTERS: TELEVISION In General: In space 6, 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 76.55(q)(2)) and (4), 76.51(q)(2) and (4), or 76.63 (referring to 76.51(q)(2)) and (4)); and (2) certain stations carried on a substitute basis under specific FCC rules, explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system 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 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 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, be entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I" (for independent multicast), "E" (for noncommercial educational situation,	LECAL NAME OF OWNED OF OF	ADI E CVCTEA			SYSTEM ID#	
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 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 station, by entering the letter "N" (for retwo	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, and also in space () the station was carried both on a substitute basis and also on some other station was carried only on a substitute basis. List the station here, and also in space () 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 streams and several services are sepaced to the television station for broadcasting over-the-air in its community of license. For example, VRRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 2: Inicidate 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 multicast). For for horizon service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an expla						Name
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 76.51(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 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 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	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), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 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 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), "For independent), "LM" (for independent multicast), "E" (for noncommercial educational station, by entering the letter "N'	Midcontinent Commu	inications			1118	
Graried 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 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 5: I	GC 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), 0.0 r 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, 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 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 ts community of licenses. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the distant station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a 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 "twe": If not, enter "two": If you carried the distant station on a part-time basis because of l	PRIMARY TRANSMITTERS: TEL	_EVISION				
	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 AC Pg 2	In General: In space G, identificarried by your cable system d FCC rules and regulations in e 76.59(d)(2) and (4), 76.61(e)(2) substitute program basis, as ex Substitute Basis Stations: basis under specifc FCC rules, Do not list the station here in station was carried only on a tist the station here, and also basis. For further informatio in the paper SA3 form. Column 1: List each station each multicast stream associat cast stream as "WETA-2". Sim WETA-simulcast). Column 2: Give the channe its community of license. For e on which your cable system ca Column 3: Indicate in each educational station, by entering (for independent multicast), "E' For the meaning of these terms Column 4: If the station is o planation of local service area, Column 5: If you have ente cable system carried the distar carried the distant station on a	fy every television staduring the accounting effect on June 24, 1982 and (4), or 76.63 (response) are partially and the properties. With respect to any so, regulations, or authors a substitute basis. The properties of the proper	period, except (81, permitting the eferring to 76.61 paragraph. of distant stations orizations: to the time that it is space I (the station was carried that basis station report origination cording to its over the period of the time that is a network of the distance of the distance of the time that is a network of the distance of th	(1) stations carried e carriage of certa (e)(2) and (4))]; and carried by your case. Special Stateme I both on a substitute, see page (v) of a program services er-the-air designate column 1 (list each the television static ington, D.C. This in the station, an independent of the station, and indicate in the listant"), enter "Yesons located in the plete column 5, so ded. Indicate by enter tivated channel control of the station of the stati	d only on a part-time basis under in network programs [sections and (2) certain stations carried on a lable system on a substitute program ent and Program Log)—if the late basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multiple stream separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial last), "I" (for independent), "I-M" mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system repacity.	
	1 CALL DEBOAST 13 TYPE 14 DISTANTY IS BASIS OF THE LOCATION OF STATION TO			4 DISTANTS	5 BASIS OF	6 LOCATION OF STATION	
1 CALL 2 B'CAST 3 TYPE 4 DISTANT? 5 BASIS OF 16 LOCATION OF STATION		1 CALL 2 R'CA	AST 3 TYPE				
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION (Yes or No.) CARRIAGE	NUMBER STATION (If Distant)	l l			CARRIAGE		
SIGN CHANNEL OF (Yes or No) CARRIAGE	KTTM-DT1 12.1 I NO HURON, SD (TCT)	SIGN CHA	ANNEL OF	(Yes or No)			

		CHANN	EL LINE-UP	AC Pg 2	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KTTM-DT1	12.1	ı	NO		HURON, SD (TCT)

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

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

LEGAL NAME OF OWNER OF Midcontinent Commun		EM:			S	8YSTEM ID# 7778	Name
SUBSTITUTE CARRIAGE	E: SPECIA	AL STATEMEN	NT AND PROGRAM LOG	i			
In General: In space I, ident substitute basis during the are explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorizations.	For a further	Substitute
1. SPECIAL STATEMENT				e general mo	addiono located in the pa	per 6/10 101111.	Carriage:
• During the accounting per	_			s. anv nonne	etwork television program	1	Special Statement and
broadcast by a distant stat			. can j, ch a cascalate such	o, a,	□Yes		Program Log
Note: If your answer is "No"	", leave the	rest of this pag	ge blank. If your answer is '	'Yes," you m	ust complete the progran	n	
log in block 2. 2. LOG OF SUBSTITUTE	PROGRA	MS					
In General: List each subst clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call: Column 4: Give the broathe case of Mexican or Can Column 5: Give the mon first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	citute prograce, please of every no distant state gulations, of tion. Do no uccy" or "NEn was broad sign of the state and and day ye "5/7." es when the Example: a er "R" if the and regulation ogramming	am on a separa attach addition nnetwork televion and that your authorization of use general of BA Basketball: deast live, entestation broadca on's location (throns, if any, the when your system substitute program carrilisted program ons in effect du	al pages. ision program (substitute pour cable system substitute pour cable system substitute is. See page (vi) of the gencategories 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 pour gram was carried by your ged by a system from 6:01:	rogram) that, d for the progeral instruction "basketball" lo." m. station is lice station is idea program. Use cable system 15 p.m. to 6:2 mming that y l; enter the le	during the accounting gramming of another state ons located in the paper. List specific program ensed by the FCC or, in ntified). In the numerals, with the monounce of the country of the	ion th y	
effect on October 19, 1976.							
s	UBSTITUT	E PROGRAM	1		EN SUBSTITUTE LIAGE OCCURRED	7. REASON	
TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	FOR DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO		
	 						
					<u> </u>		
					<u> </u>		
					<u> </u>		
		ļ					
					_		
					_		
					_		
					_		
					_		

ACCOUNTING PERIOD: 2021/2 FORM SA3E. PAGE 6.

Name	LEGAL NAME OF O	OWNER OF CABLE								SYS	TEM ID# 7778
Part-Time Carriage Log	Column 1 (C column 5 of spa Column 2 (D curred during th • Give the mont "4/10." • State the start television statio "app." Example:	s space ties in vue to lack of actiem carried that sall sign): Give face G. ates and hours the accounting perhand day when ling and ending the n's broadcast date it 12:30 a.m.— 3	vated channel contaction. If you not the call sign of each of carriage): For it is carriage oc times of carriage ay, you may give: 15 a.m. app."	eed revery	city, you are required space, plead distant station was ach station, list the distance of the nearest quarapproximate en	uired ase a whose the d s, wi ter h		s log giving the factors pages. age you identified when part-time of the st. Example: for a st. Example where carriage by the abbreviation	otal dates and d by "LAC" in carriage oc- April 10 give ran to the end	of the	
			DA	TES	AND HOURS	OF P	ART-TIME CAR	RIAGE			
	CALL SIGN	WHEN	N CARRIAGE O	CCU	RRED		CALL SIGN	WHEN	CARRIAGE C	CCURRI	ED
	CALL SIGN	DATE	H FROM	OUF	RS TO		CALL SIGN	DATE	FROM	IOURS	то
				_ _							
				=-							
				=-							
				=							
				_							
										_	
										.=	
				=-							
										_	
				_						_	
				_ _							
											

	AL NAME OF OWNER OF CABLE SYSTEM: dcontinent Communications 7	1 ID# 7778 Name
Ins all a (as pag	COSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service identified in space E) during the accounting period. For a further explanation of how to compute this amount, see ge (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	K Gross Receipts
COP'Instru Coo Good	YRIGHT ROYALTY FEE Jections: Use the blocks in this space L to determine the royalty fee you owe: Implete block 1, showing your minimum fee. Implete block 2, showing whether your system carried any distant television stations. It is pour system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum from block 1 on line 1 of block 4, and calculate the total royalty fee. It is pour system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule from panying this form and attach the schedule to your statement of account.	Copyright Royalty Fee
blod If p 3 b If p 2 ir	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of ck 3 below. art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block elow. art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line 1 block 4 below.	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the 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. \$ 1,619,856.7	_
Block 2	DIGITANT TELEVISION STATIONS SARRIED V	
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
	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. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9	Cable systems submitting additional deposits under Section 111(d)(7)
	(Interest Worksheet) 0.0 Line 4. FILING FEE. \$ 725.0	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	appropriate form for submitting the additional fees.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Midcontinent Communications	7778
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.	
Gilainiois	Enter the total number of channels on which the cable system carried television broadcast stations	19
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	385
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 Rachel Meyer Telephone 952-84	14-2655
	Address 3600 Minnesota Drive, STE 700 (Number, street, rural route, apartment, or suite number)	
	Edina, MN 55435 (City, town, state, zip)	
	Email rachel.meyer@midco.com Fax (optional)	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as 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 cin line 1 of space B.	able system
	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/ Rachel Meyer	
	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 a button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility set	
	Typed or printed name: Rachel Meyer	
	Title: Director of Programming (Title of official position held in corporation or partnership)	
	Date: February 11, 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 sufficiency of the fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
Midcontinent Communications	7778	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by addin lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the service of providing secondary transmissions of primary broadcast transmitters, the system shall not it scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section For more information on when to exclude these amounts, see the note on page (vii) of the general instruction paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmade by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	ne basic include sub- on 119."	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or und For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	erpayment.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	-	
	0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	_	
	est charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistation contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	nce please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Of please list below the owner, address, first community served, accounting period, and ID number as given in 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 Office 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 Office'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;
 the total number of DSEs for that group's complement of stations;
 and
 the amount of gross receipts attributable to that group
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

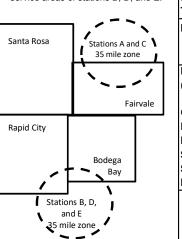
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

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

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

ACCOUNTING PERIOD: 2021/2

DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABL				S'	YSTEM ID#		
•	Midcontinent Communi	cations				7778		
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line	ı.		Į.	0.00			
2 Computation of DSEs for	Instructions: In the column headed "Call S of space G (page 3). In the column headed "DSE" mercial educational station, giv	: for each indepe	endent station, give the DSE					
Category "O"			CATEGORY "O" STATION	IS: DSEs				
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Add rows as								
necessary.								
Remember to copy all								
formula into new		<u>-</u>						
rows.		 						
		-						
		<u> </u>						
		<u> </u>						
		<u>.</u>						
		<u>.</u>						
		<u>.</u>						
		<u>.</u>						
		<u>.</u>						
		-						
		-						
		-						
		<u>.</u>						
						l		
1				<u> </u>	.]	L		

Name	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 brat the station bracedact 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 6: For each independent station, give the "bpe-value" as "1.0." For each network or noncommercial educational station, give the type-value as "2.5." 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. CATEGORY LAC STATIONS: COMPUTATION OF DSES 1. CALL 2. NUMBER 3. NUMBER OF HOURS CARRIAGE VALUE VALUE SIGN SYSTEM OF HOURS CARRIAGE VALUE VALUE VALUE VALUE SYSTEM OF HOURS CARRIAGE VALUE VALUE SYSTEM OF HOURS CARRIAGE VALUE SYSTEM OF HOURS CARRIAGE VALUE SYSTEM SYSTEM OF HOURS CARRIAGE VALUE SYSTEM SYSTEM OF SYSTEM SY	SYSTEM ID# 7778						
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 1: Lis Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-\ Column 6 third decimal p	st the call sign of all distar: For each station, give the correspond with the inform: For each station, give the Divide the figure in column at least to the third decime: For each independent solute as ".25." Multiply the figure in column.	e number of hours nation given in space total number of hom 2 by the figure in all point. This is the tation, give the "type umn 4 by the figure	your cable system to J. Calculate only ours that the station column 3, and girbasis of carriage e-value" as "1.0." F	carried the stati y one DSE for each in broadcast ove we the result in divalue" for the st For each network	on during the accordance station. If the air during the ecimals in columnation. If or noncommercial column 6. Round	e accounting perion 4. This figure must al educational stati	d. st ion,
Capacity		(CATEGORY LA	C STATIONS:	COMPUTATI	ON OF DSEs		
		2. NUMBEI OF HOU CARRIE	RS CDBY S	UMBER F HOURS TATION	4. BASIS OF CARRIAG	5.		6. DSE
			÷			x	=	
						·····		
						••••••		
			······					
			·····			••••••		
			÷	=		x	=	
			÷	-	-	х	=	
	Add the DSEs	of each station.		e,			0.00	
Computation of DSEs for Substitute-Basis Stations	Column 1: Giv. • Was carried tions in effe • Broadcast o space I). Column 2: Fat your option. Column 3: E Column 4: I	by your system in substift on October 19, 1976 (a ne or more live, nonnetwo For each station give the rather the number of days Divide the figure in column This is the station's DSE (ution for a program is shown by the letter inch programs during in mumber of live, none pond with the inform in the calendar yea in 2 by the figure in of for more information	that your system or "P" in column 7 that optional carria network programs nation in space I. r: 365, except in a column 3, and given on rounding, see	was permitted to of space I); and ge (as shown by t carried in substi leap year. the result in col e page (viii) of th	delete under FCC he word "Yes" in co tution for program umn 4. Round to r e general instructi	C rules and regular lumn 2 of s that were deleted no less than the thicons in the paper S	d
		SL	BSTITUTE-BAS	SIS STATION:		ATION OF DSE	Es ,	
		OF	OF DAYS	4. DSE		OF	OF [DAYS
		÷					÷	
				=				=
		## ## ## ## ## ## ## ## ## ## ## ## ##	=					
Middontinent Communications Instructions Instructions Computation Column 1: 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 of, claduates only one DES for each station of column 3: For each station, give the header of hours your cable system carried the station during the accounting period. Column 3: For each station, give the header of hours and the station broadcast over the air during the accounting period. Column 3: Profess of carriage value of the five five in column 3. This figure in column 3: For the five five in five inclinate or inclinate 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the duction of the column 3: Profess of carriage value of the co								
5				in parts 2, 3, and 4	f of this schedule	and add them to p	rovide the total	
Total Number	1. Number	of DSEs from part 2 ●		·		•	0.00	
of DSEs	l							
OI DOLS	2. Number	of DSEs from part 3 ●				>	0.00	
OI DOLS		·				<u> </u>		

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

	OWNER OF CABLE S						S	YSTEM ID# 7778	Name
	ck A must be comp								
In block A:	·		art 6 and part 7	of the DSE schedu	ıle blank and	complete part 8	8 (page 16) of the		6
schedule.	"No," complete blo	•	•	or the Bell conlege	are plant and	oompioto part	o, (pago 10) oi illo		
ii your anowor ii	Tro, complete ble	one B and O i		TELEVISION MA	ARKETS				Computation of 3.75 Fee
effect on June 24,	1981?		•	er markets as defin			C rules and regula	tions in	3.75 Fee
_	plete blocks B and		J NOT COMPI	LETE THE REMAIN	NDER OF PAR	RI O AND 7.			
		BLO	CK B: CARF	RIAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	egulations pric ne DSE Sched	or to June 25, 1 Iule. (Note: The	part 2, 3, and 4 of the 981. For further ex e letter M below ref Act of 2010.)	planation of p	ermitted station	ns, see the	Š	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered	les and regulated pursuant to on as defined al educational station (76.6	ations cited be the FCC mark in 76.5(kk) (76 I station [76.59 5) (see paragr	is on which you cal low pertain to those ket quota rules [76. 6.59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subs	e in effect on 5 57, 76.59(b), (1), 76.63(a) r 8(a) referring t	June 24, 1981. 76.61(b)(c), 76 referring to 76.6 to 76.61(d)]	6.63(a) referring to		
	•	ant to individu viously carried IHF station wi	al waiver of F0 d on a part-time thin grade-B co	e or substitute basi ontour, [76.59(d)(5)	•		ring 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			ksheet on page 14	of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
						II		0.00	
		E	BLOCK C: CC	OMPUTATION OF	3.75 FEE				
_ine 1: Enter the	total number of I	DSEs from p	art 5 of this s	chedule					
Line 2: Enter the	sum of permitted	d DSEs from	block B abov	ve				-	
				of DSEs subject t of this schedule)		ite.		0.00	
_ine 4: Enter gro	oss receipts from	space K (pa	ge 7)				x 0.03	275	Do any of the DSEs represent
ine 5: Multiply li	ine 4 by 0.0375 a	nd enter sur	n here				X 0.03	,,,,,	partially permited/
o o. manupry 11	Sy 0.0010 a	a ontoi oui					х	_	partially nonpermitted carriage?
Line 6: Enter tota	al number of DSE	Es from line 3	3					-	If yes, see part 9 instructions.
ine 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: Midcontinent Communications SYSTEM ID# 7778								Mana	
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	JED)			_	
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 of 3.75 Fee	
									0.70100	

ACCOUNTING PERIOD: 2021/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Midcontinent Communications** 7778 Instructions: You must complete this worksheet for those stations identified 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 DSE PERIOD CARRIAGE SIGN DSE Instructions: Block A must be completed. 7 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? Yes—Complete blocks B and C . X 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. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN DSE CALL SIGN DSE DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Midcontinent Communications	SYSTEM ID# 7778	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,619,856.77	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSI is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	≣	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	▼ Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSI is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here	-	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM: Midcontinent Communications	SYSTEM ID# 7778								
	<u>'</u>	Middonthient Communications	1110								
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		A. Enter 0.00300 of gross receipts (the amount in section 1)									
of the 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.	<u></u>								
	Instruc	ctions:									
8	You m	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	art								
		checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.									
Computation		r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.									
of Base Rate Fee	• If you blank	rr answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B bel	ow								
Dase Nate i ee		. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers									
	were lo	ocated within that station's local service area and others were located outside that area. For the definition of a station's "loc	al								
	service	e area," see page (v) of the general instructions.									
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS									
	• Did yo	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.										
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE									
	Section 1	Enter the amount of gross receipts from space K (page 7)	<u> 5.77</u>								
	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.) ▶	0.00								
	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) ▶ _ \$ 11,355.20									
		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	<u>-</u>								
		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	<u> </u>								

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

	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name					
Midco	ontinent Communications 7778						
Section 4	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	_					
4	A. Enter 0.01064 of gross receipts	8					
	(the amount in section 1) ▶\$						
	B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$	Computation of					
	(the dinealt in section 1)	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 be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in	9					
•	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation					
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this on, you must:	of					
CACIUSI	on, you must.	Base Rate Fee					
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same 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. : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	and Syndicated Exclusivity 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, cable system is wholly located outside all major television markets, complete block A only.	Distant Stations, and for Partially					
	Identify a Subscriber Group for Partially Distant Stations	Permitted					
	For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Stations					
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne token, the station is distant to the subscriber.)						
subscri	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.						
Comp ugroups	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber						
	section:						
	fy the communities/areas represented by each subscriber group.						
	the 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.						
• If:							
, -	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 t	ne 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 general instructions in the paper SA3 form.							
page. DSEs f	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding 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.						

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 7778 **Midcontinent Communications** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

				TE FEES FOR EAC				
FIRST SUBSCRIBER GROUP COMMUNITY/ AREA 0				SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0				9
	T por		T BOE		Lpor	II out gov		Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate
	······································		••••					and
								Syndicat
								Exclusiv
								Surchar
								for
								Partiall
	<u>.</u>							Distant Station
	·····			-				Station
	<u>.</u>		·····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Second Group \$ 0.00			0.00	
	THIRD	SUBSCRIBER GRO	UP	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>							
Total 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		0.00	Base Rate Fee Four	rth Group	\$	0.00		
		1			-			
				s shown in the boxes a				

Nonpermitted 3.75 Stations

CALL SIGN DSE CALL SIGN	LEGAL NAME OF OW Midcontinent Co			-			,	SYSTEM ID# 7778	Name
CALL SIGN DSE CA					ATE FEES FOR EAC				
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE and Real Face First Group \$ 0.00 CALL SIGN DSE CALL SIG			SUBSCRIBER GRO				SUBSCRIBER GRO		۵
CALL SIGN OSE	COMMUNITY/ AREA 0			COMMUNITY/ ARE.	Α		0	_	
and and syndicated Exclusivity Surcharge for Partially Distant Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Syndicated Exclusivity									Base Rate Fe
Exclusivity Surcharge for Partialty Distant Stations									
Surcharge for Partially Distant Stations				····					
Potal DSEs Third Stubscriber Group Third DSE CALL SIGN DS				····					
Colal DSEs Colal					-				
Stations Statio									Partially
Total DSEs O.00 Gross Receipts First Group Third DSBSCRIBER GROUP THIRD SUBSCRIBER GROUP COMMUNITY/ AREA OCMMUNITY/ AREA OCMUNITY/ AREA OCMUNITY/ AREA OCMUNITY/ AREA OCMUNITY/ AREA OCMUNITY/ AREA OC									
Gross Receipts First Group 3 0.00 Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 TOTAL SIGN DSE CALL SIGN DSE DIAM COMMUNITY/ AREA D D D D D D D D D D D D D				····					Stations
Gross Receipts First Group 3 0.00 Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 TOTAL SIGN DSE CALL SIGN DSE DIAM COMMUNITY/ AREA D D D D D D D D D D D D D				····	-	•••••			
Gross Receipts First Group 3 0.00 Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 TOTAL SIGN DSE CALL SIGN DSE DIAM COMMUNITY/ AREA D D D D D D D D D D D D D									
Gross Receipts First Group 3 0.00 Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 TOTAL SIGN DSE CALL SIGN DSE DIAM COMMUNITY/ AREA D D D D D D D D D D D D D									
Gross Receipts First Group 3 0.00 Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 TOTAL SIGN DSE CALL SIGN DSE DIAM COMMUNITY/ AREA D D D D D D D D D D D D D				<u>.</u>					
Gross Receipts First Group 3 0.00 Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 TOTAL SIGN DSE CALL SIGN DSE DIAM COMMUNITY/ AREA D D D D D D D D D D D D D								0.00	
Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CAL					Total DSEs				
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL	Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
CALL SIGN DSE CA	Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN		THIRD	SUBSCRIBER GRO)UP	FOURTH SUBSCRIBER GROUP				
Total DSEs O.00 Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Sase Rate Fee Third Group \$ 0.00 Fees Rate Fee Fourth Group \$ 0.00 Fees Rate Fees Fourth Group \$ 0.00 Fees	COMMUNITY/ AREA 0			COMMUNITY/ AREA 0					
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.				····					
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
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 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third Group \$ 0.00		Gross Receipts Fou	rth Group	\$	0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
	Dase Kate Fee Thire	u Group	\$	0.00	Base Kate Fee Fou	ıın Group	\$	0.00	
				criber group a	as shown in the boxes	above.	\$	0.00	

ACCOUNTING PERIOD: 2021/2

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Midcontinent Communications** 7778 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation Second 50 major television market First 50 major television market of INSTRUCTIONS: **Base Rate Fee** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Exclusivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown