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					
TORCOT TRIGITI					
DATE RECEIVED	AMOUNT				
8/8/2022	\$				
	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	2022/1							
B	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.							
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM							
	DEKALB TELEPHONE COOPERATIVE, INC.							
				629062022/1				
				62906 2022/1				
	111 HIGH ST. ALEXANDRIA, TN 37012							
С	INSTRUCTIONS: In line 1, give any business or trade names used to id							
System	names already appear in space B. In line 2, give the mailing address of the indentification of cable system:	ine system, ii dille	erent from the address giver	i in space в.				
- ,	1							
	MAILING ADDRESS OF CABLE SYSTEM:							
	(Number, street, rural route, apartment, or suite number)							
	(City, town, state, zip code)							
D	Instructions: For complete space D instructions, see page 1b. Identify of	only the frst comm	unity served below and reli	st on page 1b				
Area	with all communities.	T						
Served	CITY OR TOWN	STATE						
First Community	ALEXANDRIA	TN						
y	Below is a sample for reporting communities if you report multiple char CITY OR TOWN (SAMPLE)	nnel line-ups in Sp STATE	oace G. CH LINE UP	SUB GRP#				
	Alda	MD	A	1 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 sufficiency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2022/1 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 62906 DEKALB TELEPHONE COOPERATIVE, INC. Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **ALEXANDRIA** TN **First MILTON** TN Α Community **READYVILLE** ΤN Α **BRADYVILLE** ΤN Α **MORRISON** ΤN Α WOODBURY TN Α See instructions for **DOWELLTOWN** TN Α additional information on alphabetization. **GORDONSVILLE** TN Α **LANCASTER** TN Α **ELMWOOD** ΤN Α LIBERTY TN Α Add rows as necessary. **SMITHVILLE** TN Α **LASCASSAS** TN Α **BRUSH CREEK** TN Α **CARTHAGE** ΤN Α **HICKMAN** ΤN Α WATERTOWN TN Α

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ΙL				

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 62906

DEKALB TELEPHONE COOPERATIVE, INC.

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		BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE
Residential:	COBCONIDENCE		TOTIL	OMEGOIN OF GENVIOL	COBCONIBENC		TUTE
 Service to first set 	4,212	\$	34.99	ENHANCED	2,286	\$	55.00
 Service to additional set(s) 	5,520	\$	5.00	DELUXE	1,111	\$	15.00
 FM radio (if separate rate) 		Ī		HI-DEF	3,061	\$	14.99
Motel, hotel		I					
Commercial	41						
Converter							
 Residential 							
Non-residential							
ſ	1	1			1	1	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

BLOCK 1						BLOCK 2			
CATEGORY OF SERVICE	F	ATE	CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	ATEGORY OF SERVICE RATE		
Continuing Services:			Installation: Non-residential						
• Pay cable			Motel, hotel			НВО	\$	18.99	
 Pay cable—add'l channel 			Commercial			SHOWTIME	\$	18.99	
Fire protection			Pay cable	[STARZ	\$	8.99	
Burglar protection	\$	19.95	 Pay cable-add'l channel 	[ENCORE	\$	7.99	
Installation: Residential			Fire protection			STARZ/ENCORE	\$	12.99	
• First set			Burglar protection			CINEMAX	\$	16.99	
 Additional set(s) 			Other services:				T		
• FM radio (if separate rate)			Reconnect	\$	10.00				
Converter			Disconnect	\$	10.00		T		
			Outlet relocation				T		
			 Move to new address 				I		

FORM SA3E. PAGE 3.					OVOTEN ID	,1	
LEGAL NAME OF OWN			- 1110		SYSTEM ID#	Name	
DEKALB TELEF	PHONE CO	OPERATIVI	E, INC.		62906		
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
					and low power television stations)	G	
	l by your cable system during the accounting period, except (1) stations carried only on a part-time basis under ules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections						
				-	and (2) certain stations carried on a	Primary	
substitute program bas				a corried by your a	able system on a substitute program	Transmitters:	
basis under specifc FC				s carried by your o	able system on a substitute program	Television	
·				e Special Statem	ent and Program Log)—if the		
station was carried	•		tion was sorries	d both on a substi	tute basis and also an asmo other		
	•				tute basis and also on some other of the general instructions located		
in the paper SA3 for	rm.	-		, ,	-		
		-	-		s such as HBO, ESPN, etc. Identify tion. For example, report multi-		
			•	•	h stream separately; for example		
WETA-simulcast).					to a few boards and a setting account to a state		
			-		ion for broadcasting over-the-air in may be different from the channel		
on which your cable sy	•			g.c, 2.0	ay 20 ameren nem me ename.		
					ependent station, or a noncommercial		
•	-		, ,		ast), "I" (for independent), "I-M" ommercial educational multicast).		
For the meaning of the	se terms, see	page (v) of the	e general instruc	ctions located in tl	ne paper SA3 form.		
planation of local service				,.	es". If not, enter "No". For an ex-		
					stating the basis on which your		
		•	• • • • • • • • • • • • • • • • • • • •	•	tering "LAC" if your cable system		
carried the distant stati	-				capacity. / payment because it is the subject		
					stem or an association representing		
•	•		-		ry transmitter, enter the designa-		
` ' '			•	•	ther basis, enter "O." For a further ed in the paper SA3 form.		
Column 6: Give the	location of ea	ch station. Fo	r U.S. stations,	list the community	y to which the station is licensed by the		
FCC. For Mexican or C Note: If you are utilizing				•	n which the station is identifed.		
	9		•			-	
		CHANN	EL LINE-UP	AA		1	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)			
WTVF	5	N N	No	(If Distant)	NASHVILLE	†	
		·····					
WTVF-HD	305	N-M	No		NASHVILLE	See instructions for	
WSMV	4	N	No		NASHVILLE	additional information on alphabetization.	
WSMV-HD	304	N-M	No		NASHVILLE		
WSMV-COZI	50	N-M	No		NASHVILLE		
WKRN	2	N	No		NASHVILLE		
WKRN-HD	302	N-M	No		NASHVILLE		
CW WNAB	6	I	No		NASHVILLE	1	
CW WNAB-HD	306	I-M	No		NASHVILLE	"	
		·····				-	
PBS WNPT	8	E	No No		COOKEVILLE		
PBS WNPT-HD 308 E-M No COOKEVILLE							
FOX WZTV 17 I No NASHVILLE							
FOX WZTV-HD 317 I-M No NASHVILLE							
METV 18 N No NASHVILLE]	
METV-HD	318	N-M	No		NASHVILLE		
PBS WCTE	22	E	No		COOKEVILLE	1	
PBS WCTE-HD	322	E-M	No		COOKEVILLE	1	
						.	
WTVF NEWS CHA 23 N-M No NASHVILLE							

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM Name 62906 **DEKALB TELEPHONE COOPERATIVE. INC.** 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 AB 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER **STATION** (If Distant) **PAX WNPX** 28 ı NASHVILLE NASHVILLE LAFF WTVF 29 N-M 30 I-M **NASHVILLE** MYTV WNPX **MYTV WNPX-HD NASHVILLE** 330 I-M **WEATHER NATIO** 51 I-M **NASHVILLE** ANTENNA TV WZ 52 I-M **NASHVILLE GET TV WUXP** 53 **NASHVILLE** ı **COMET WUXP** 54 I-M **NASHVILLE JUSTICE WKRN** 55 N-M **NASHVILLE GRIT WKRN** 56 N-M **NASHVILLE PBS KIDS** 76 E-M COOKEVILLE **BOUNCE WKRN** 137 N-M **NASHVILLE**

ACCOUNTING PERIOD: 2022/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62906 DEKALB TELEPHONE COOPERATIVE, INC. 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. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** 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 LOCATION OF STATION **WJLE** FΜ SMITHVILLE, TN

FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 2022/1

TOTAL CAGE 1.						ACCOUNTING	11 LINIOD. 2022/1
DEKALB TELEPHONE					S	YSTEM ID# 62906	Name
SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG				
In General: In space I, identi substitute basis during the ac explanation of the programm	counting pe	riod, under spec	cific present and former FCC	rules, regula	itions, or authorizations. F	or a further	Substitute
1. SPECIAL STATEMENT	CONCER	NING SUBSTI	ITUTE CARRIAGE				Carriage:
During the accounting per	iod, did you	r cable system	carry, on a substitute basi	s, any nonne	twork television program		Special Statement and
broadcast by a distant state Note: If your answer is "No"		rest of this nad	e blank If your answer is "	Ves " voli mi	Yes		Program Log
log in block 2.	, icave tric	rest of this pag	c blank. If your answer is	res, you me	ast complete the program	•	
2. LOG OF SUBSTITUTE	PROGRA	MS					
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 monfirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	ce, please a of every nor distant statis gulations, o tion. Do no ucy" or "NB n was broad sign of the sadian statio at the and day "ee "5/7." es when the Example: a er "R" if the and regulatic ogramming	attach additional network televity on and that your authorizations true general conditions and the station broadcast live, enterestation broadcast in the station broadcast	al pages. sion program (substitute pur cable system substituteds. See page (vi) of the generategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community with which the stem carried the substitute program was carried by your ded by a system from 6:01:10 was substituted for programing the accounting period;	rogram) that, a for the program instruction "basketball". o." m. station is lice station is ider brogram. Use table system. 5 p.m. to 6:2 mming that yenter the let	during the accounting tramming of another state on slocated in the paper. List specific program ensed by the FCC or, in stiffied). In the numerals, with the monormal security and the times accurated the security and the securit	th y	
13, 1370.				WHI	EN SUBSTITUTE	7 0540011	
S	UBSTITUT	E PROGRAM		CARR	IAGE OCCURRED	7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION	
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ACCOUNTING	PERIOD: 2022/1						FOF	RM SA3E. PAGE 6.	
Name	LEGAL NAME OF C			NC.				SYSTEM ID# 62906	
J Part-Time Carriage Log	PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.								
			DATES	S AND HOURS (OF PART-TIME C	ARRIAGE			
		\//UEN	N CAPPIACE OCCI	IDDED		\/\L	N CARRIAGE OCC	TIDDED	
	CALL SIGN	VVIICI	N CARRIAGE OCCL HOUF		CALL SIGN	1 7000	HOL		
		DATE	FROM	TO		DATE	FROM	ТО	
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	AL NAME OF OWNER OF CABLE SYSTEM: EKALB TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 62906	Name					
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. (Amount of gross receipts)								
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.								
bloc ► If pa 3 be ► If pa	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entect 3 below. art 6 of the DSE schedule was completed, the amount from line 7 of block C should be enterelow. art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be a block 4 below.	ed on line 2 in block						
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are least the minimum fee, regardless of whether they carried any distant stations. This fee is 1 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.	\$ 892,140.03						
Block 2	This is your minimum fee. DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the informable space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? Yes—Complete the DSE schedule. No—Leave block 3 below blank and complete the DSE schedule.	mation you gave in you must check						
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or	\$ -						
	schedule. If none, enter zero 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.	\$ 9,492.37 0.00	Cable systems submitting additional deposits under					
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00 \$ 725.00	Section 111(d)(7) should contact the Licensing additional fees.					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	10,217.37	Division for the appropriate form for submitting the additional fees.					

		FURM SA3E, PAGE 8.						
Name	DEKALB TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 62906						
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	stations						
Channels	Enter the total number of channels on which the cable system carried television broadcast stations							
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	106						
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 MINDY GRIFFITH Telephone	615-464-2267						
	Address 111 HIGH ST (Number, street, rural route, apartment, or suite number)							
	ALEXANDRIA, TN 37012 (City, town, state, zip)							
	Email MGRIFFITH@STAFF-DTC.COM Fax (optional)							
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regu	lations.)						
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;							
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ownership.							
	in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained in	•						
	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/ Joe Mitchell							
	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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compa							
	Typed or printed name: Joe Mitchell							
	Title: Controller (Title of official position held in corporation or partnership)							
	Date: January 26, 2022							

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: DEKALB TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 62906	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 adding to lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the beservice of providing secondary transmissions of primary broadcast transmitters, the system shall not inclusively service 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 instructions in paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmit made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below.	vasic ude sub- 119." n the	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 underp For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	ayment.	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	274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)		
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.		
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office please list below the owner, address, first community served, accounting period, and ID number as given in the filing.		
Owner Address		
First community served Accounting period ID number		

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

ACCOUNTING PERIOD: 2022/1

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.

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

 1.064% of gross receipts
 Each of the second, third, and fourth DSEs
 0.701% of gross receipts

 The fifth and each additional DSE

 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

- 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.

Santa Rosa	Stations A and C 35 mile zone					
	Fairvale					
Rapid City						
,-	Bodega Bay					
Stations B, D, and E 35 mile zone						

	Distant Stations Carried		identification of	t 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)	<u>0.25</u>	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

		φ0,304.00			
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: 2022/1

DSE SCHEDULE. PAGE	LEGAL NAME OF OWNER OF CABL	E CVCTEM:			9/9	STEM ID#		
1			T INC		J.	62906		
	DEKALB TELEPHONE (62906		
	SUM OF DSEs OF CATEGORY "O" STATIONS:							
	Add the DSEs of each station				0.00			
	Enter the sum here and in line	1 of part 5 of this	schedule.		0.00			
	Instructions:			-		•		
2	In the column headed "Call S	Sign": list the cal	I signs of all distant stations	identified by the	e letter "O" in column 5			
	of space G (page 3).							
Computation	In the column headed "DSE"			as "1.0"; for ea	ach network or noncom-			
of DSEs for	mercial educational station, giv	e the DSE as ".2		10. 505				
Category "O"	0.414, 0.1044	T 505	CATEGORY "O" STATION	1	0.444.01044			
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Add rows as								
necessary.								
Remember to copy all								
formula into new				.				
rows.				·				
				.				
		• • • • • • • • • • • • • • • • • • • •						
				·				
				·				
				<u>-</u>				
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				- 				

Į	 P	 	

Name		DWNER OF CABLE SYSTEM: LEPHONE COOPERA	ATIVE, INC.				5	62906
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	figure should correspond with the information given in space J. Calculate only one DSE for each station. Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 3: For each station, give the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.							
Capacity		(CATEGORY	LAC STATIONS:	COMPUTAT	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOI CARRIE SYSTE	URS ED BY M	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OI CARRIAG VALUE	GE VALU	E	SE
			÷ ÷			x x	=	
			÷			x	=	
			÷		=	x x	=	
			÷		=	x x	=	
			÷	:	=	x	=	
			÷		•	x	=	
	Add the DSEs	of CATEGORY LAC S of each station. Im here and in line 2 of p		nedule,		0.00)	
Computation of DSEs for Substitute-Basis Stations	Column 1: Giv Was carried tions in effether broadcast capace I). Column 2: at your option. Column 3: Column 4:	re the call sign of each stands of of each s	itution for a pro (as shown by the ork programs do number of live spond with the s in the calenda nn 2 by the figu	gram that your system ne letter "P" in column 7 uring that optional carria n, nonnetwork programs information in space I. ar year: 365, except in a re in column 3, and giv	was permitted to of space I); and age (as shown by a carried in substance a leap year. e the result in co	o delete under FCC rules the word "Yes" in column 2 itution for programs that lumn 4. Round to no less	of were deleted than the third	n).
		Sl	JBSTITUTE	-BASIS STATION	S: COMPUT/	ATION OF DSEs	_	
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBI OF DAY IN YEA	/S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			÷	=			÷	=
			÷ ÷	=			÷ ÷	=
			÷	=			÷	=
			:	=			÷	=
	Add the DSEs	OF SUBSTITUTE-BASI				0.00)	=
5		ER OF DSEs: Give the ams applicable to your system		boxes in parts 2, 3, and	4 of this schedule	and add them to provide	the total	
Total Number	1. Number	of DSEs from part 2●				>	0.00	
of DSEs	2. Number	of DSEs from part 3 ●				<u> </u>	0.00	
	3. Number	of DSEs from part 4 ●				-	0.00	
	TOTAL NUMBE	R OF DSEs						0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2022/1

	WNER OF CABLE S		INC.				S	YSTEM ID# 62906	Name
block A: f your answer if	ck A must be compl		ırt 6 and part 7	of the DSE schedu	ıle blank and (complete part	8, (page 16) of the		6
hedule. f your answer if	"No," complete bloc	cks B and C t	nelow						
r your arlower ii	140, Complete Bloc	ono B una O k		TELEVISION MA	ARKETS				Computation
fect on June 24,	1981?		•	er markets as define			C rules and regula	ations in	3.75 Fee
_	plete part 8 of the solete blocks B and (O NOT COMP	LETE THE REMAIN	NDER OF PAR	RI6 AND 7.			
		BLO	CK B: CARF	RIAGE OF PERM	IITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulatio e DSE Scheo	ns prior to Jun Iule. (Note: Th	part 2, 3, and 4 of the e 25, 1981. For furt e letter M below ref Act of 2010.)	ther explanation	on of permitted	stations, see the	,	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica D Grandfathered instructions for E Carried pursua *F A station prev	les and reguled pursuant to a defined al educational station (76.6 r DSE schedunt to individuzionsly carrie	ations cited be to the FCC mare in 76.5(kk) (70 I station [76.595) (see paragule). al waiver of F0 d on a part-tim	sis on which you callow pertain to those ket quota rules [76. 6.59(d)(1), 76.61(e) 9(c), 76.61(d), 76.63 raph regarding subsection (76.7) the or substitute basicontour, [76.59(d)(5)	e in effect on 557, 76.59(b), (1), 76.63(a) r (3(a) referring t stitution of gra	June 24, 1981. 76.61(b)(c), 76.61(b)(c), 76.61(d)] and fathered state 25, 1981	5.63(a) referring to 61(e)(1) ations in the		
Column 3:	*(Note: For those this schedule to d	each distant s e stations ider letermine the	tation listed in tified by the le DSE.)	parts 2, 3, and 4 of etter "F" in column 2	, you must co	mplete the wo	1		
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								0.00	
		E	BLOCK C: CC	OMPUTATION OF	3.75 FEE				
e 1: Enter the	total number of [OSEs from p	art 5 of this s	schedule					
ne 2: Enter the	sum of permitted	DSEs from	block B abo	ve				-	
				of DSEs subject to 7 of this schedule)		te.	,	0.00	
ne 4: Enter gro	ess receipts from s	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represe partially
ie 5: Multiply li	ne 4 by 0.0375 ar	nd enter sur	n here				x		partially permited partially nonpermitt
ne 6: Enter tota	al number of DSE	s from line 3	3					<u>-</u>	carriage? If yes, see p 9 instruction
ne 7: Multinly li	ne 6 by line 5 and	d enter here	and on line 2	, block 3, space L	(page 7)			0.00	

ACCOUNTING PERIOD: 2022/1

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name DEKALB TELEPHONE COOPERATIVE, INC. 62906 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. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Schedule for 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 6. PERMITTED 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT SIGN DSE **PERIOD** CARRIAGE DSE DSE Instructions: Block A must be completed. 7 Computation If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule of the 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 . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any community served by the cable system prior to March 31, 1972? (refer commercial VHF station that places a grade B contour, in whole 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 CALL SIGN CALL SIGN DSE DSE DSE DSE 0.00 0.00 **TOTAL DSEs TOTAL DSEs**

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: DEKALB TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 62906	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	892,140.03	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 any	y portion of the cable system within a top 50 television market as defned by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSI	<u> </u>	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSI is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
	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			STEM ID# 62906			
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. F. Multiply line D by line E and enter here. F. Multiply line D by line E and enter here. S. G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge.				
Computation of Base Rate Fee	Instructions: You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of 6 was checked "Yes," use the total number of DSEs from part 5. In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be					
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS our cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the following sections. BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE Enter the amount of gross receipts from space K (page 7). Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes,"				
	Section 3	use the total number of DSEs from part 5.). ▶ If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1). ▶ B. Enter 0.00701 of gross receipts (the amount in section 1). ▶ C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here. ▶ D. Multiply line B by line C and enter here. ▶ E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee. ▶ \$	0.00			

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2022/1

	AME OF OWNER OF CABLE SYSTEM: ALB TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 62906	Name
Section 4	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		_
4	A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ \$	_	8
	B. Enter 0.00701 of gross receipts (the amount in section 1)		Computation of Base Rate Fee
	C. Multiply line B by 3.000 and enter here ▶\$	_	buse rate rec
	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	
	CTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcat be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe G.		9
receipt	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee s from subscribers located within the station's local service area, from your system's total gross receipts. To take a on, you must:		Computation of
exclusi	on, you must.		Base Rate Fee
station DSEs	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for the control of the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	and Syndicated Exclusivity Surcharge
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in must a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
Step 1	Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	tion you	for Partially Permitted Stations
Step 2 outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were loger the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)		
Step 3 subscr	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Comp	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syst	tem's subscriber	
	section:		
• Give	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 al bers in the group.	II of the	
• lf: 1) your	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it i	n parts 2, 3, and	
2) any	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 b	olock B,	
•	6 of this schedule. ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calcu	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general is paper SA3 form.	instructions	
• Comp page. DSEs t	bute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need calculations on the form.	at is, the total	