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					
02/21/23	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@copyright.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	2022/2								
Period									
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate 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 submi 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								
	ACE TELEPHONE ASSOCIATION								
	ACENTEK								
				6240320222					
				62403 2022/2					
	PO BOX 360								
	HOUSTON MN 55943								
	INSTRUCTIONS: In line 1, give any business or trade names used to	identify the busines	ss and operation of the syst	em unless these					
С	names already appear in space B. In line 2, give the mailing address								
System	1 IDENTIFICATION OF CABLE SYSTEM:								
	ACENTEK								
	MAILING ADDRESS OF CABLE SYSTEM:								
	2 (Number, street, rural route, apartment, or suite number)								
	(City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page 1b. Ident	fy only the frst comr	nunity served below and rel	ist on page 1b					
Area	with all communities.	.,,		iot on page 12					
Served	CITY OR TOWN	STATE							
First	HOUSTON	MN							
Community	Below is a sample for reporting communities if you report multiple of	hannel line-ups in S	pace G.						
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#					
Sample	Alda	MD	Α	1					
Campio	Alliance	MD	В	2					
	Gering	MD	В	3					

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

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: ACE TELEPHONE ASSOCIATION 62403 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. STATE CH LINE UP SUB GRP# CITY OR TOWN **HOUSTON** MN **LEX** First **EITZEN** MN **LEX** Community **BROWNSVILLE LEX** MN HOKAH MN **LEX** LACRESCENT LEX 1 MN CALEDONIA MN **LEX** See instructions for **SPRING GROVE** MN **LEX** additional information on alphabetization. DAKOTA MN LEX 2 RUSHFORD MN REX **PETERSON** MN **REX LANESBORO** MN **REX** Add rows as necessary REX 2 CANTON MN **GRANGER** MN **REX** 3 **OSTRANDER** MN **REX** 4 FORT ATKINSON IA **CEX CASTALIA** IA CEX **OSSIAN** IA **CEX** IA **CEX** 2 **NEW ALBIN** IΑ CLERMONT CEX WATERVILLE IA CEX 5 HARPERS FERRY IA **CEX** 5 MN LNS HOUSTON **EITZEN** MN LNS **BROWNSVILLE** MN **LNS** HOKAH MN LNS 1 LACRESCENT MN LNS CALEDONIA MN LNS **SPRING GROVE** MN LNS **DAKOTA** MN LNS RUSHFORD MN **RNS PETERSON** MN **RNS LANESBORO** MN **RNS** CANTON MN **RNS GRANGER** MN **RNS** 3 **OSTRANDER** MN **RNS** 4 FORT ATKINSON IA CNS CNS IA **CASTALIA** OSSIAN IA CNS

IA

IA

IA

IA

CNS

CNS

CNS

CNS

2 3

NEW ALBIN

CLERMONT

WATERVILLE HARPERS FERRY

······	

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

ACE TELEPHONE ASSOCIATION

SYSTEM ID#
62403

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLOCK 1					BLOCK 2				
0.475.0001/.05.0501//.05	NO. OF			П	0.475.000.000.000.000.000	NO. OF	5.475		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	Ц	CATEGORY OF SERVICE	SUBSCRIBERS	RATE		
Residential:									
Service to first set	3,814	\$	37.95						
Service to additional set(s)									
 FM radio (if separate rate) 				Ш					
Motel, hotel				Ш					
Commercial	90	\$	37.95	11					
Converter		1		11					
Residential		1		11					
Non-residential		1		11					
1	 	•		4 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.

	BLO	CK 1		BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable		Motel, hotel		НВО	\$ 15.95
 Pay cable—add'l channel 		Commercial		CINEMAX	\$ 12.50
Fire protection		Pay cable		SHOWTIME	\$ 10.99
Burglar protection		Pay cable-add'l channel		STARX/ENCORE	\$ 12.50
Installation: Residential		Fire protection			
First set		Burglar protection			
Additional set(s)		Other services:			
• FM radio (if separate rate)		Reconnect			
Converter		Disconnect			
		Outlet relocation			
		Move to new address			

ACE TELEPHO	INIED OF CADI E CA				OVOTEMID	.44
ACE IELEPHO					SYSTEM ID 6240	Name
					6240	3
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program be Substitute Basis basis under specifc F • Do not list the station station was carried • List the station here basis. For further in the paper SA3 f Column 1: List ea each multicast stream cast stream as "WET WETA-simulcast). Column 2: Give the station of licer on which your cable stream as "WET as in the paper SA3 in the pap	TERS: TELEVISION OF COMMENTS O	y television since accounting in June 24, 19 (4), or 76.63 (ed in the next respect to any ations, or auth G—but do listitute basis. ace I, if the stateming substitute is sign. Do not the a station ace streams must ber the FCC I e, WRC is Chine station.	g period, excep 981, permitting to referring to 76.6 paragraph. y distant station norizations: st it in space I (the ation was carried itute basis station report origination excording to its own to be reported in has assigned to nannel 4 in Wasi	t (1) stations carried to (2) and (4))]; s carried by your he Special Staten ed both on a subsions, see page (v) on program service ver-the-air design column 1 (list each the television state hington, D.C. This	as and low power television stations) ied only on a part-time basis under rtain network programs [sections and (2) certain stations carried on a cable system on a substitute program ment and Program Log)—if the titute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- ch stream separately; for example tition for broadcasting over-the-air in s may be different from the channel dependent station, or a noncommercial	G Primary Transmitters: Television
(for independent multi- For the meaning of the Column 4: If the separation of local services and carried the distant state for the retransmiss of a written agreement the cable system and the cable s	ticast), "E" (for n nese terms, see station is outside vice area, see p have entered "Y the distant station ation on a part-ti ssion of a distant nt entered into od a primary trans r simulcasts, als three categories	oncommercial page (v) of the the local ser age (v) of the es" in column on during the me basis becat multicast strandr or before Jumitter or an age enter "E". If	al educational), all educational), all educational), all egeneral instruction 4, you must confide accounting periodical earn that is not une 30, 2009, bussociation repressions and the social earn that the social earn that is not une 30, 2009, bussociation repressions accounted the	or "E-M" (for nono actions located in distant"), enter "Y tions located in the implete column 5 iod. Indicate by e activated channel subject to a royal etween a cable si esenting the prime channel on any of	Yes". If not, enter "No". For an ex- ne paper SA3 form. It stating the basis on which your ntering "LAC" if your cable system I capacity. It payment because it is the subject system or an association representing ary transmitter, enter the designa- other basis, enter "O." For a further	
FCC. For Mexican or	Canadian statio	ons, if any, giv	e the name of t	list the communi the community wi	red in the paper SA3 form. Ity to which the station is licensed by the the which the station is identifed. In channel line-up.	
FCC. For Mexican or	Canadian statio	ons, if any, giv	ve the name of t use a separate	list the communi the community wi	ty to which the station is licensed by the the which the station is identifed.	
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Transmitters:

Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

ACE TELEPHONE ASSOCIATION

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 Primary

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	REX1,REX2	
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
KTCA	2	E	Yes	0	ST PAUL MN PBS
KXLT	47	I	No		ROCHESTER MN FOX
KAAL	6	N	No		AUSTIN MN ABC
KSMQ	15	E	No		AUSTIN MN PBS
KTTC	10	N	No		ROCHESTER MN NBC
KTTC.2	10.2	N-M	No		ROCHESTER MN CW
KTTC.4	10.4	N-M	No		ROCHESTER MN Quest
KXLT.2	47.2	I-M	No		ROCHESTER, MN METV
wcco	4	N	Yes	0	MINNEAPOLIS MI CBS
WKBT	8	N	No		LA CROSSE WI CBS
WKBT.2	8.2	N-M	No	•	LA CROSSE WI MYNET
KTTC.3	10.3	N-M	No		ROCHESTER MN H&I
			•	•	
				•	

Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

ACE TELEPHONE ASSOCIATION

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.

Transmitters:

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	REX3,REX4	
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
KTCA	2	Е	Yes	0	ST PAUL MN PBS
KXLT	47	I	No		ROCHESTER MN FOX
KAAL	6	N	No		AUSTIN MN ABC
KSMQ	15	E	No		AUSTIN MN PBS
KTTC	10	N	No		ROCHESTER MN NBC
KTTC.2	10.2	N-M	No		ROCHESTER MN CW
KTTC.4	10.4	N-M	No		ROCHESTER MN Quest
KXLT.2	47.2	I-M	No		ROCHESTER, MN METV
wcco	4	N	Yes	0	MINNEAPOLIS MI CBS
WKBT	8	N	No		LA CROSSE WI CBS
WKBT.2	8.2	N-M	No	•	LA CROSSE WI MYNET
KTTC.3	10.3	N-M	No		ROCHESTER MN H&I
				•	
			•		
				•	

Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

ACE TELEPHONE ASSOCIATION

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.

Transmitters:

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	CEX1	
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
KWWL.2	7.2	N-M	No		WATERLOO IA H&I
KGAN 2.2	2.2	I	No		CEDAR RAPIDS IA FOX 28
KWWL	7	N	No		WATERLOO IA NBC
KGAN 2.1	2.1	N	No		CEDAR RAPIDS IA CBS
KGAN 2.3	2.3	N-M	No		CEDAR RAPIDS IA Quest
WHLA	31	E	No		LA CROSSE WI PBS
KRIN	32	E	No		WATERLOO IA PBS
KWWL.5	7.5	N-M	No		WATERLOO IA True Crime
KFXA.1	28.1	I-M	No		CEDAR RAPIDS IA CHARGE TV
KFXA28.6	28.6	I-M	No		CEDAR RAPIDS IA DABL
KWWL.3	7.3	N-M	No		WATERLOO IA METV
				•	

LEGAL NAME OF OWNER OF CABLE SYSTEM:

ACE TELEPHONE ASSOCIATION

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), 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

Television

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.

CHANNEL LINE-UP CEX2,CEX5								
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			
KWWL	7	N	No		WATERLOO IA NBC			
KGAN 2.2	2.2	I	No		CEDAR RAPIDS IA FOX 28			
KWWL	7	N	No		WATERLOO IA NBC			
KGAN 2.1	2.1	N	No		CEDAR RAPIDS IA CBS			
KGAN 2.3	2.3	N-M	No		CEDAR RAPIDS IA Quest			
WHLA	31	E	No		LA CROSSE WI PBS			
KRIN	32	E	No		WATERLOO IA PBS			
KWWL.5	7.5	N-M	No		WATERLOO IA True Crime			
KFXA.1	28.1	I-M	No		CEDAR RAPIDS IA CHARGE TV			
KFXA28.6	28.6	I-M	No		CEDAR RAPIDS IA DABL			
KWWL.3	7.3	N-M	NO		WATERLOO IA METV			

LEGAL NAME OF OWNER OF CABLE SYSTEM:

ACE TELEPHONE ASSOCIATION

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), 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

Television

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	CEX3	
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
KWWL.2	7.2	N-M	NO		WATERLOO IA H&I
KGAN 2.2	2.2	I	NO		CEDAR RAPIDS IA FOX 28
KWWL	7	N	No		WATERLOO IA NBC
KGAN 2.1	2.1	N	NO		CEDAR RAPIDS IA CBS
KGAN 2.3	2.3	N-M	NO		CEDAR RAPIDS IA Quest
WHLA	31	E	No		LA CROSSE WI PBS
KRIN	32	Е	NO		WATERLOO IA PBS
KWWL.5	7.5	N-M	No		WATERLOO IA True Crime
KFXA.1	28.1	I-M	NO		CEDAR RAPIDS IA CHARGE TV
KFXA28.6	28.6	I-M	NO		CEDAR RAPIDS IA DABL
KWWL.3	7.3	N-M	No		WATERLOO IA METV

FORM SA3E. PAGE 3.					Accoonti	14G 1 EMOD. 2022/2			
LEGAL NAME OF OWN	ER OF CABLE SY	/STEM:			SYSTEM ID#	Name			
ACE TELEPHO	NE ASSOCI	ATION			62403	Name			
PRIMARY TRANSMITTE	RS: TELEVISIO	N							
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the cons in effect or 5.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (ed in the next	g period, except 81, permitting the referring to 76.6 paragraph.	t (1) stations carrine carriage of cersi1(e)(2) and (4))];	s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a	Primary Transmitters: Television			
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.									
basis. For further in in the paper SA3 fo	formation conc rm.	erning substi	tute basis statio	ns, see page (v)	itute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify				
each multicast stream	associated with	h a station ac	cording to its ov	er-the-air design	ation. For example, report multi- ch stream separately; for example				
its community of licens on which your cable sy	se. For example estem carried th	e, WRC is Ch ne station.	annel 4 in Wash	nington, D.C. This	tion for broadcasting over-the-air in smay be different from the channel ependent station, or a noncommercial				
educational station, by	entering the le cast), "E" (for no	etter "N" (for n oncommercia	etwork), "N-M" (al educational), d	(for network multi or "E-M" (for nonc	cast), "I" (for independent), "I-M" commercial educational multicast).				
planation of local servi	ce area, see pa ave entered "Ye	age (v) of the es" in column	general instruct 4, you must co	tions located in th mplete column 5,	stating the basis on which your				
carried the distant stati For the retransmiss	ion on a part-tir ion of a distant	me basis beca multicast stre	ause of lack of a	activated channel subject to a royalt	ntering "LAC" if your cable system capacity. by payment because it is the subject stem or an association representing				
tion "E" (exempt). For sexplanation of these the Column 6: Give the	simulcasts, also ree categories e location of ea	o enter "E". If , see page (v ch station. Fo	you carried the) of the general or U.S. stations,	channel on any c instructions locat list the communit	ary transmitter, enter the designa- other basis, enter "O." For a further ed in the paper SA3 form. by to which the station is licensed by the th which the station is identifed.				
Note: If you are utilizing		nnel line-ups,		space G for each					
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				
KSTP	5	N	Yes	0	ST PAUL MN ABC				
KMSP	9	I	Yes	0	MINNEAPOLIS MN FOX				
KARE	11	N	Yes	0	MINNEAPOLIS MN NBC				
			163		MINICAI OLIO MINIO				

FORM SA3E. PAGE 3.									
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name			
ACE TELEPHO	NE ASSOCI	ATION			62403				
PRIMARY TRANSMITT	ERS: TELEVISIO	ON NC							
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), 07.6.61(e)(2) and (4), 07.61(e)(2) and (4), 07.6.61(e)(2) and (4). 07.6.61(e)(4) and (4). 07.6.61(e)(4) and (4). 07.6.61(e)(4)									
		. ,		•					
Total ii you are amen	- Ig manipio onai	•	•	RNS1,RNS2,	•				
4 0011	O DIOACT			, ,					
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
SIGIV	NUMBER	STATION	, ,	(If Distant)					
KSTP	5	N	Yes	O	ST PAUL MN ABC				
KMSP	9	1	Yes	0	MINNEAPOLIS MN FOX				
KARE	11	N.		0	MINNEAPOLIS MN NBC				
NAINE		N	Yes		MINICAT OLIO MININOS				

FORM SA3E. PAGE		VOTEL:			OVOTEM IDA	
	OWNER OF CABLE ST				SYSTEM ID# 62403	Name
					02403	
In General: In spacarried by your can FCC rules and reg 76.59(d)(2) and (4) substitute Basis under specific Do not list the station was carried the station was carried the distance of the meaning of Column 1: List each multicast stream as "WWETA-simulcast). Column 2: Givitis community of life on which your cab Column 3: Indieducational station (for independent in For the meaning of Column 5: If the planation of local so Column 5: If you cable system carried the distant For the retransion of a written agreer the cable system atten "E" (exempt). explanation of the Column 6: Givinn	ace G, identify ever ble system during to pulations in effect on a passis, as explained is Stations: With it is CFC rules, regulation here in space ried only on a subset of the system carried only on a subset of the system carried earn associated with ETA-2". Simulcast the channel numbers. For example, le system carried to it is each station, "E" (for not fit hese terms, see the station on a part-timestation on a part-timestation of a distantent entered into cand a primary transfer simulcasts, also three categories et the location of each set of each set of each station of each station of each set of each set of each station of a distantent entered into cand a primary transfer simulcasts, also three categories et the location of each set of each station of each set of each station of each set of eac	y television so the accounting in June 24, 19 (4), or 76.63 (ed in the next respect to any attions, or auth G—but do listitute basis. ace I, if the staterning substitute basis. ace I, if the station ac streams must ber the FCC I e, WRC is Chine station. whether the station. whether the setter "N" (for in concommercial page (v) of the esi in column on during the esi in column on during the multicast stream or before Justicial str	g period, excep 981, permitting to 76.6 paragraph. y distant station norizations: stit in space I (the ation was carried tute basis static report origination coording to its own to be reported in the assistance of lack of annel 4 in Wasl tation is a network), "N-M" all educational), regeneral instructive area, (i.e. "general instructive area (i.e. "general instructive	t (1) stations carri- the carriage of cert for (e)(2) and (4))]; is carried by your the Special Statem and both on a substitute on program service over-the-air designate column 1 (list each the television state hington, D.C. This ork station, an ind (for network multifor "E-M" (for noncutions located in the distant"), enter "Y- tions located in the index in the column 5, index index in the column 5, index index in the process of the primal expension of the primal expension of the primal expension of the instructions located list the communit	s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program tent and Program Log)—if the situte basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- eth stream separately; for example tion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). the paper SA3 form. es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your stering "LAC" if your cable system	G Primary Transmitters: Television
	tilizing multiple cha			•		
		CHANN	EL LINE-UP	CNS1,CNS2		
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	
KSTP	5	N	Yes	0	ST PAUL MN ABC	
WKBT	8	N	No		LA CROSSE WI CBS	
WKBT.2	8.2	N-M	No		LA CROSSE WI MYNET	

FORM SA3E. PAGE 3.					ACCOUNTIN	NG PERIOD: 2022/2				
LEGAL NAME OF OWN	IER OF CABLE S'	YSTEM:			SYSTEM ID#	Name				
ACE TELEPHO	NE ASSOC	IATION			62403	Name				
PRIMARY TRANSMITTE	ERS: TELEVISION	ON								
carried by your cable s FCC rules and regulat	system during t ions in effect o 6.61(e)(2) and (he accounting n June 24, 19 (4), or 76.63 (g period, except 181, permitting the referring to 76.6	t (1) stations carr he carriage of cei	as and low power television stations) ied only on a part-time basis under tain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:				
Substitute Basis S	Stations: With	respect to an	y distant station	s 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 spa formation cond	ace I, if the sta			titute basis and also on some other of the general instructions located					
• •		sign. Do not	report originatio	n program servic	es such as HBO, ESPN, etc. Identify					
			•	•	ation. For example, report multi- ch stream separately; for example					
	se. For example	e, WRC is Ch	-		tion for broadcasting over-the-air in s may be different from the channel					
Column 3: Indicate	in each case	whether the s			lependent station, or a noncommercial					
					cast), "I" (for independent), "I-M" commercial educational multicast).					
For the meaning of the	ese terms, see	page (v) of th	e general instru	ctions located in	the paper SA3 form.					
planation of local servi	ce area, see p	age (v) of the	general instruct	tions located in th						
					stating the basis on which your ntering "LAC" if your cable system					
carried the distant stat	ion on a part-ti	me basis bec	ause of lack of a	activated channe	capacity.					
					ty payment because it is the subject ystem or an association representing					
the cable system and	a primary trans	mitter or an a	ssociation repre	esenting the prim	ary transmitter, enter the designa-					
` '			•	•	other basis, enter "O." For a further ted in the paper SA3 form.					
					ty to which the station is licensed by the					
FCC. For Mexican or (Note: If you are utilizing		. ,		•	th which the station is identifed.					
Note: If you are united	ig multiple cha		EL LINE-UP		т спапно пно-чр.					
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION					
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE						
	NUMBER -	STATION		(If Distant)						
KSTP	5	N	Yes	0	ST PAUL MN ABC					
WKBT	8	N	Yes	0	LA CROSSE WI CBS					
WKBT.2	8.2	N-M	Yes	0	LA CROSSE WI MYNET					
			•							

FORM SA3E. PAGE 3.					0//07514 ID#			
LEGAL NAME OF OWN					SYSTEM ID#	Name		
ACE TELEPHO	NE ASSOC	IATION			62403			
PRIMARY TRANSMITT	ERS: TELEVISION	ON						
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), 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). For the meaning of these terms, see page (v) of the general instructions located in the								
Note: II you are utilizii	ig multiple cha	•	•	space G for each	cnanner line-up.			
	T	CHANN	EL LINE-UP					
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			
			•	•				
			•	•				
			•	•				
								

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 62403 ACE TELEPHONE ASSOCIATION 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 LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5. ACCOUNTII	IG PERIOD: 2022/2									
LEGAL NAME OF OWNER OF CABLE SYSTEM: ACE TELEPHONE ASSOCIATION 6240	Namo									
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a	l									
substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.	Substitute									
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE	Carriage: Special									
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? ☐ Yes ☒ No										
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS	Program Log									
In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast 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). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.										
SUBSTITUTE PROGRAM WHEN SUBSTITUTE 7. REASON FOR										
1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S Yes or No CALL SIGN 4. STATION'S LOCATION 5. MONTH 6. TIMES DELETION AND DAY FROM — TO										

ACCOUNTING PERIOD: 2022/2 FORM SA3E, PAGE 6. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62403 ACE TELEPHONE ASSOCIATION **PART-TIME CARRIAGE LOG** J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime 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 Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give · State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m.' DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

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

	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Nama				
AC	E TELEPHONE ASSOCIATION			62403	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)									
IMF	during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.		(Amount of g	929,663.83 (ross 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.									
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should book 3 below.	e enter	red on line	1 of					
3 b	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be ellow.								
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be	entered on	line					
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee 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.		Ψ	929,003.03					
	This is your minimum fee.	\$		9,891.62					
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colum "Yes" in this block. • Did your cable system carry any distant television stations during the accounting perion with the property of the	mn 4, yo	ou must ch	eck					
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$	2,037.73					
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			9,218.69					
	Line 3. Add lines 1 and 2 and enter here	\$		11,256.42					
Block	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee								
4	from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger		\$	11,256.42	Cable systems				
	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			0.00	submitting additional deposits under				
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)								
	Line 4. FILING FEE		\$	725.00	the Licensing additional fees. Division for the				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here								
	EFT Trace # or TRANSACTION ID # 76372019741				additional fees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form and the Excel instructions to								

Name	LEGAL NAME OF OWNER	OF CABLE S	YSTEM:	SYSTEM ID#							
Name	ACE TELEPHONE	ASSOC	HATION	62403							
	CHANNELS										
M	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.										
Channels	1 Enter the total nu	mbor of o	pappals on which the cable								
	Enter the total number of channels on which the cable system carried television broadcast stations										
	•										
		•	arried television broadcast stations	280							
	and nonbroadcast	services									
N	INDIVIDUAL TO BE	CONTA	CTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual								
	we can contact abou		· · · ·								
Individual to											
Be Contacted for Further	Name CYNTH	IIA SW	FFT Telephone	507 896 6211							
Information	Name Official		тегергите								
	Address 207 E C	CEDAR	. PO BOX 360								
			oute, apartment, or suite number)								
	HOUST (City, town,		N 55943								
	(City, town,	state, zip)									
	Email	cswee	t@acentek.net Fax (optional)								
	CERTIFICATION (Thi	is statem	ent of account must be certifed and signed in accordance with Copyright Office re	gulations.							
Ο											
Certifcation	• I, the undersigned, h	nereby cer	tify that (Check one, but only one, of the boxes.)								
	(Owner other tha	n cornor	ition or partnership) I am the owner of the cable system as identifed in line 1 of space	oo Ri or							
	(Owner other tha	ii coi poi	table of particleship) I am the owner of the cashe system as identified in line 1 or space	, oi							
	(Agent of owner	other tha	n corporation or partnership) I am the duly authorized agent of the owner of the cab	le system as identified							
	in line 1 of spa	ace B and	that the owner is not a corporation or partnership; or								
	X (Officer or partne	er) I am a	n officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as o	owner of the cable system							
	in line 1 of spa	ace B.									
	I have examined the	statemer	t of account and hereby declare under penalty of law that all statements of fact contai	ned herein							
	are true, complete, ar [18 U.S.C., Section 1		to the best of my knowledge, information, and belief, and are made in good faith.								
	[10 0.0.0., 0000011 1	001(1300	u								
		X	/s/Michael Osborne								
		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 curso								
	"F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.										
		Typed o	or printed name: MICHAEL OSBORNE								
		-	050								
		Title:	CEO (Title of official position held in corporation or partnership)								
			, , , , , , , , , , , , , , , , , , ,								
		Date:	February 21, 2023								

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 th 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 telephor 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 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#	Name					
ACE TELEPHONE ASSOCIATION	62403	Nume					
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.							
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?							
X NO							
YES. Enter the total here and list the satellite carrier(s) below							
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.	derpayment.	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	- 00274						
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	<u>-</u>						
(interes	st charge)						
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assist contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	ance 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 O 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 Offce to collect the personally identifying information (PII) requested on th 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: 2022/2

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerica value given by the Copyright Act to each distant television station carriec 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 accoun (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 C 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 or 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 particula 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 ε 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, ir 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 beer 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 statior 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 Syndicatec 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 pursuan to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/o 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 ir
 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; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

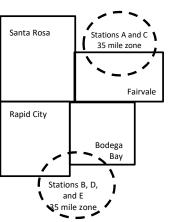
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



	Distant Stations Carried		Identification of	f Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
nin	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
s	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 DSFs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6 384 00

Ψο,οο 1.οο							
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: 2022/2

DSE SCHEDULE. PAGE					0)	OTEM ID#					
1	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM II										
•	ACE TELEPHONE ASSO					62403					
	SUM OF DSEs OF CATEGOR										
	Add the DSEs of each station				0.50						
	Enter the sum here and in line	1 of part 5 of this	schedule.		3.50						
•	Instructions:										
2	In the column headed "Call S	ign": list the call	signs of all distant stations i	dentified by the I	etter "O" in column 5						
Computation	of space G (page 3). In the column headed "DSE"	for each indepe	ndent station, give the DSE.	oo "1 O": for ooo	h notwork or noncom						
of DSEs for	mercial educational station, giv	e the DSF as " 2:	ndent station, give the DSE : 5 "	as 1.0 , lor eac	n network of noncom-						
Category "O"	moreiai eddediionai etalien, giv	S: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	KTCA	0.250	07.122.01011		0, 122 0.0.1						
	WCCO	0.250									
	***************************************	0.230									
	WKBT	0.250									
	WHLA	0.250									
Add rows as	KSTP	0.250									
nacaccary											
Remember to convial	KMSP	1.000									
formula into new	KARE	0.250									
rows.	KXLT	1.000									
	·	J	i e e e e e e e e e e e e e e e e e e e			t					

Name		ER OF CABLE SYSTEM: NE ASSOCIATION	N				s	YSTEM ID# 62403
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: Fo figure should corre Column 3: Fo Column 4: Div be carried out at le Column 5: Fo give the type-value Column 6: Mu	e call sign of all dista or each station, give t espond with the infor or each station, give t vide the figure in colu- east to the third decir or each independent se e as ".25."	he number of houmation given in some total number of the total number of the figure of	irs your cable systemace J. Calculate of fhours that the stare in column 3, and the "basis of carriagitype-value" as "1.0. ure in column 5, and	em carried the stanly one DSE for oftion broadcast own give the result in ge value" for the search netwood give the result in get the result in the search netwood give the result in the search netwood give the result in the search netwood give the result in the search network.	tion during the accountine each station. er the air during the accordecimals in column 4. T	ounting period. his figure must ucational station,	
Capacity		С	ATEGORY LA	AC STATIONS:	COMPUTATI	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEN	R 3. JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	6. DS	iΕ
			÷ ÷ ÷		=	x x x	= = =	
			÷ ÷		=	x x x	= = =	
	Add the DSEs of ea	CATEGORY LAC S ach station. ere and in line 2 of p			= ▶	0.00]	
Computation of DSEs for Substitute-Basis Stations	Was carried by tions in effect of Broadcast one of space I). Column 2: For at your option. This Column 3: Ente Column 4: Divide	your system in subst n October 19, 1976 (or more live, nonnetwood each station give the figure should correst the number of days de the figure in colum	itution for a progras shown by the ork programs durinumber of live, respond with the infinite in the calendar years by the figure	am that your syster letter "P" in columning that optional carronnetwork program formation in space lear: 365, except in in column 3, and gi	n was permitted to 7 of space I); and riage (as shown by the scarried in substance). a leap year. to the result in communication of the second in substance).	rograms) if that station: to delete under FCC rule d the word "Yes" in column titution for programs that blumn 4. Round to no les the general instructions i	2 of t were deleted es than the third	orm).
		SUI	BSTITUTE-BA	SIS STATION	S: COMPUTA	TION OF DSEs		
	SIGN	NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR		1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷				÷		=
	Add the DSEs of ea	SUBSTITUTE-BAS ach station. ere and in line 3 of p		dule,		0.00		
5 Total Number of DSEs		plicable to your systen Es from part 2● Es from part 3●		es in parts 2, 3, and	d 4 of this schedul	e and add them to provide	3.50 0.00 0.00	
	TOTAL NUMBER O	F DSEs						3.50

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2022/2

ACE TELEPHO							S	YSTEM ID# 62403	Name
schedule.	ck A must be comp "Yes," leave the re "No," complete blo	emainder of p		7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	the	6
			BLOCK A: T	ELEVISION M	ARKETS				Computation of 3.75 Fee
I <u>=</u>		schedule—[C below.	OO NOT COMI		AINDER OF F	PART 6 AND 7		gulations in	3.731 66
0-1 4-	1: (4							1.4	
Column 1: CALL SIGN	under FCC rules	and regulations Be DSE Sche	ons prior to Jur dule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For function ne letter M below r Act of 2010.)	ırther explana	ation of permitt	ed stations, see tl	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfatherece instructions fo E Carried pursue *F A station pre	lles and regued pursuant to as defined all educations of station (76.4) or DSE sched ant to individuation with the station will be station wil	lations cited be of the FCC many distribution of the FCC many distribution (76.5 distribution) (76.5 distr	6.59(d)(1), 76.61(e)(c), 76.61(d), 76. raph regarding sul CC rules (76.7) ne or substitute ba contour, [76.59(d)(se in effect or 6.57, 76.59(b e)(1), 76.63(a 63(a) referring bstitution of g sis prior to Ju	n June 24, 198), 76.61(b)(c), n) referring to 7 g to 76.61(d) randfathered s	76.63(a) referring 6.61(e)(1 stations in the		
Column 3:		e stations ide	ntified by the l	parts 2, 3, and 4 etter "F" in column			vorksheet on page	e 14 of	
1. CALL	2. PERMITTED	3. DSE	1. CALL	2. PERMITTED	3. DSE	1. CALL	2. PERMITTED	3. DSE	
SIGN KTCA	BASIS	0.25	SIGN	BASIS		SIGN	BASIS		
WKBT		0.25							
WHLA		0.25							
WKBT.2		0.25							
						••••••		d	
								····	
								1.00	
		В	LOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule			n <u> </u>		
Line 2: Enter the	sum of permitte	d DSEs fror	n block B abo	ove			n-		
	line 2 from line 1 leave lines 4–7 b			•		rate.			
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375 a	and enter sı	ım here				X		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSI	Es from line	3				<u></u>		carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, space	e L (page 7)			0.00	

Name	62403							ONE ASSOCIA	
			JED)	(CONTIN	ION MARKETS	A: TELEVIS	BLOCK		
6	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	1. CALL SIGN
Computation 3.75 Fe									
3.7316									
	•								

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name ACE TELEPHONE ASSOCIATION 62403 Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage. Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 6. PERMITTED 1. CALL 3. ACCOUNTING 4. BASIS OF 5. PRESENT 2. PRIOR **PERIOD CARRIAGE** SIGN DSE DSE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity Surcharge Is any portion of the cable system within a top 100 major television market as defned by section 76.5 of FCC rules in effect June 24, 1981? X No—Proceed to part 8 Yes-Complete blocks B and C. 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? (refe 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 DSE CALL SIGN DSE CALL SIGN DSE DSE CALL SIGN 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: ACE TELEPHONE ASSOCIATION	SYSTEM ID# 62403	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
- '	Enter the amount of gross receipts from space K (page 7)	929,663.83	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	portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? 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 Definition of the section is a section in the section of the section is a section of the section is a section of the section is a section of the section of the section is a section of the section is a section of the section of the section is a section of the section of the section of the section is a section of the	SE.	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.)E	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)	_	
	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		
Section 4a	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 4b blank. NOTE: If the Dis 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name	LEGAL NAM	IE OF OWNER OF CABLE SYSTEM: SYSTEM ID#
Name	,	ACE TELEPHONE ASSOCIATION 62403
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		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$
Exclusivity 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. \$
0	Instruc You mi	etions: List complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part
8		checked "Yes," use the total number of DSEs from part 5.
Computation		ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.
of		r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below
Base Rate Fee	blank	
		s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers located within that station's local service area and others were located outside that area. For the definition of a station's "local
		area," see page (v) of the general instructions.
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?
		Yes—Complete part 9 of this schedule. 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) ▶\$
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) ▶
	Section	
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.
		A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ _ \$
		B. Enter 0.00701 of gross receipts (the amount in section 1)
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here
		D. Multiply line B by line C and enter here
		E. Add lines A, and D. This is your base rate fee. Enter here
		and in block 3, line 1, space L (page 7)
		Base Rate Fee

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2022/2

	AME OF OWNER OF CABLE SYSTEM: TELEPHONE ASSOCIATION	SYSTEM ID# 62403	Name
Section	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 ▶ \$		
	D. Enter 0.00330 of gross receipts (the amount in section 1) \$\Bigsim \bigsim		
	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	
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca I be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe G.		9
In Gen receipt	G. eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fees 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 Base Rate Fee
station DSEs a	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: Add up 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 impute 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	Didentify 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.	ition 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 lost the station's local service area. A subscriber located outside the local service area of a station is distant to that state to the token, the station is distant to the subscriber.)		
Step 3 subscri	: 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.		
groups	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sys. a section:	tem's subscriber	
• Identi • Give	rection. 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 ibers in the group.	Il of the	
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it is schedule; or,	n parts 2, 3, and	
2) any	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in t 6 of this schedule.	olock B,	
	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general is paper SA3 form.	instructions	
page.	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (th for that group's complement of stations and total gross receipts from the subscribers in that group). You do not ne	at is, the total	

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

actual calculations on the form.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 62403 **ACE TELEPHONE ASSOCIATION** 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.

LEGAL NAME OF OWNE						\$	SYSTEM ID#	Name
ACE TELEPHONE	ASSOCI	ATION					62403	Name
B	LOCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EA	CH SUBSCRII	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	LEX1			COMMUNITY/ ARE	A LEX2			9
								and Syndicated Exclusivity
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
KTCA	0.25			KTCA	0.25			Base Rate Fee
								and
		-						Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.25	Total DSEs			0.25	
Gross Receipts First G	roup	s 476	073.14	Gross Receipts Se	cond Group	\$	56,464.19	
	·					·*		
Base Rate Fee First G	roup	\$ 1	266.35	Base Rate Fee See	cond Group	\$	150.19	
	THIRD	SUBSCRIBER GROU	JP		FOURTH :	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	REX1	ODDOT NIDER OF O	<u> </u>	COMMUNITY/ ARE		JOBOOT NIBER OF CO	01	
OOMMONTT / AREA	11271			OOMMONT 17 AIRE	-/- 11-/-			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
KTCA	0.25	CALL SIGN	DOL	KTCA	0.25	CALL SIGN	DOL	
KIOA	0.20			MCCO	0.25			
					0.20			
		-						
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		-						
Total DSEs			0.25	Total DSEs			0.50	
Gross Receipts Third C	Group	<u>\$</u> 194	501.17	Gross Receipts For	urth Group	\$	9,723.29	
Base Rate Fee Third G	Froun	\$	517.37	Base Rate Fee Foo	ırth Group	\$	51.73	
Dase rate i ee miid d	up	<u> </u>	317.37	Last Rate 1 ee 1 of	arar Group	<u> </u>	31.73	
				Ш				
Base Rate Fee: Add th	ne base rat	e fees for each subsc	riber group	as shown in the boxe	es above.			
Enter here and in block						\$	2,037.73	

	62403							ACE TELEPHONE
-)	IBER GROUP SUBSCRIBER GROUP		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		BL
Gomputation of Base Rate In and				COMMUNITY/ AREA			REX3	COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			0.25	KTCA			0.25	KTCA
Exclusivi Surcharg			-					
for Partially Distant							-	
Stations			-				-	
	0.25			Total DSEs	0.25			Total DSEs
	4,190.00	\$ 4	d Group	Gross Receipts Second	749.21	\$ 1,	oup	Gross Receipts First Gro
	11.15	\$		Base Rate Fee Second	•	\$	•	
	'	SUBSCRIBER GROUP	EIGHTH		•	\$ SUBSCRIBER GROU	EVENTH	S
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=	'		EIGHTH		•	1.	EVENTH	S
=		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	S COMMUNITY/ AREA
		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	S COMMUNITY/ AREA
		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	S COMMUNITY/ AREA
		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	S COMMUNITY/ AREA
		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	S COMMUNITY/ AREA
		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	S COMMUNITY/ AREA
		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	S COMMUNITY/ AREA
		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	COMMUNITY/ AREA
		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	S COMMUNITY/ AREA
		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	S COMMUNITY/ AREA
		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	S COMMUNITY/ AREA
		SUBSCRIBER GROUP	EIGHTH	COMMUNITY/ AREA	JP	SUBSCRIBER GROU	EVENTH CEX1	S COMMUNITY/ AREA
	DSE	SUBSCRIBER GROUP CALL SIGN	DSE DSE	COMMUNITY/ AREA CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN

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Total DSEs TOTAL	Surcharge							•	
Fotal DSEs Total	for Partially								
Fotal DSEs	Distant								
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Gross Receipts First Group S 15,564.12 Gross Receipts Second Group S 56,463.97 Base Rate Fee First Group ELEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA LNS1 CALL SIGN DSE CALL SIGN DS			<u> </u>			ļ			
Base Rate Fee First Group ELEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA LNS1 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE TOTAL DSES D.00 Total DSES D.00 Total DSES D.00		0.00			Total DSEs	0.00			Γotal DSEs
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ELEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA LNS1 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE COMMUNITY/ AREA LNS1 COMMUNITY/ AREA RNS1									
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CALL SIGN DSE CA		JP	SUBSCRIBER GROU	TWELVTH		JP	SUBSCRIBER GROU	EVENTH	EL
Total DSEs O.00 Total DSEs O.00				RNS1	COMMUNITY/ AREA			LNS1	COMMUNITY/ AREA
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Gross Receipts Third Group \$ 33,223.68 Gross Receipts Fourth Group \$ 7,381.36					Total DSEs				lotal DSEs
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Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00		0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	oup	Base Rate Fee Third G
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9 Compu	0	SOBSCRIBER GROOF	XILLINIII .	COMMUNITY/ AREA		30B3CNBER GROC	RNS2	COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	•	\$		Gross Receipts Secon		\$		
	0.00		l Group	Base Rate Fee Secon	7.60	\$ SUBSCRIBER GROU	oup	ase Rate Fee First Gro
	0.00	\$	d Group	Base Rate Fee Secon	7.60	\$	oup	Base Rate Fee First Gro
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	0.00	\$ SUBSCRIBER GROUP	TEENTH STATES OF THE STATES OF	Base Rate Fee Secon S COMMUNITY/ AREA CALL SIGN KSTP	7.60	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First Green FIF
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	0.00	\$ SUBSCRIBER GROUP	TEENTH STATES OF THE STATES OF	Base Rate Fee Secon S COMMUNITY/ AREA CALL SIGN KSTP WKBT	7.60	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First Green FIF
	0.00	\$ SUBSCRIBER GROUP	CNS1 DSE 0.25 0.25	Base Rate Fee Secon S COMMUNITY/ AREA CALL SIGN KSTP WKBT	7.60	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First Green FIF
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9 Computat	SEVENTEENTH SUBSCRIBER GROUP AREA CNS2 COMMUNITY/ AREA CNS3					COMMUNITY/ AREA		
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	200.64	\$	d Croup	Gross Receipts Secon	563.96	\$ 1,5	oun	
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iross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWENTY-THIRE	SUBSCRIBER GRO)UP	TWEN	ITY-FOURTH	SUBSCRIBER GROU	JP	
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								for Partially Distant
								Stations
Total DSEs			0.25	Total DSEs		-	0.25	
Gross Receipts First Group \$ 476,073.14				Gross Receipts Sec	cond Group	\$	56,464.19	
Base Rate Fee First Gro	oup	\$ 4,	463.19	Base Rate Fee Sec	ond Group	\$	529.35	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	REX1			COMMUNITY/ AREA REX2				
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			0.25	Total DSEs			0.00	
otal DSEs				Gross Receipts Fou	ırth Group	\$	9,723.29	
	oup			11		_	_	
	oup							
Total DSEs Gross Receipts Third Gr Base Rate Fee Third Gr	·		823.45	Base Rate Fee Fou	ırth Group	\$	0.00	
Gross Receipts Third Gr	·		823.45	Base Rate Fee Fou	irth Group	\$	0.00	

Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.25 4,190.00	BER GROUP SUBSCRIBER GROUP CALL SIGN	SIXTH	COMMUNITY/ AREA CALL SIGN WCCO		CALL SIGN		BL COMMUNITY/ AREA CALL SIGN WCCO
Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.25 4,190.00		DSE	CALL SIGN			REX3	CALL SIGN
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and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.25 4,190.00		0.25	WCCO			0.25	WCCO
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		<u>↓</u>	Total DSEs	0.25		1	Total DSEs
	\$	Group	Gross Receipts Second	749.21	\$ 1,	oup	Gross Receipts First Gr
39.28	\$	Group	Base Rate Fee Second	16.40	\$	oup	Base Rate Fee First Gr
OUP	SUBSCRIBER GROU	EIGHTH S		JP	SUBSCRIBER GROU	SEVENTH	5
		CEX2	COMMUNITY/ AREA			CEX1	COMMUNITY/ AREA
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								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 15	,564.12	Gross Receipts Sec	cond Group	\$	56,463.97	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	cond Group	s	0.00	
	•		-					
E		SUBSCRIBER GRO	UP			SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	LNS1			COMMUNITY/ ARE	A RNS1			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
KSTP	0.25			KSTP	0.25			
KMSP	1.00			KMSP	1.00	_		
KARE	0.25	_		KARE	0.25	-		
		-				_		
		-						
		-						
		-						
		-						
Total DSEs			1.50	Total DSEs			1.50	
Gross Receipts Third (Group	\$ 33	,223.68	Gross Receipts Fou	urth Group	\$	7,381.36	
	_							
Base Rate Fee Third G	Group	\$ 1	,868.83	Base Rate Fee Fou	ırth Group	\$	415.20	
Done Date For A 110	- h	- face for an 1						
Base Rate Fee: Add th Enter here and in block			criber group	as snown in the box	es above.	\$		

AGE TEEET HORE	ASSOCI	E SYSTEM: ATION				S	62403	Name
				TE FEES FOR EAC				
THI	RTEENTH	SUBSCRIBER GR	OUP	FO	URTEENTH	SUBSCRIBER GROU	UP	Ω
COMMUNITY/ AREA	NITY/ AREA RNS2 COMMUNITY/ AREA 0					9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	SE CALL SIGN DSE CALL SIGN DSE				of
KSTP	0.25							Base Rate F
KMSP	1.00							and
KARE	0.25							Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
								Stations
			1.50	Total DSEs		II.	0.00	
-t-I DCC-			1.50	HIOMHUSES		-	0.00	
							0.00	
	roup	\$	537.00	Gross Receipts Seco	nd Group	\$	0.00	
Gross Receipts First G		\$				\$	0.00	
Gross Receipts First G	roup		537.00 30.21	Gross Receipts Seco	nd Group	\$ SUBSCRIBER GROU	0.00	
Total DSEs Gross Receipts First G Base Rate Fee First G FI COMMUNITY/ AREA	roup	\$	537.00 30.21	Gross Receipts Seco	nd Group	\$	0.00	
Gross Receipts First G Base Rate Fee First G	roup	\$	537.00 30.21	Gross Receipts Seco	nd Group	\$	0.00	
Gross Receipts First G Base Rate Fee First G FI COMMUNITY/ AREA	roup FTEENTH RNS4	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Gross Receipts First G Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN	FTEENTH RNS4 DSE	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Gross Receipts First G Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Gross Receipts First G Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Gross Receipts First G Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Gross Receipts First G Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Gross Receipts First G Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP KARE	FTEENTH RNS4 DSE 0.25 1.00	\$ SUBSCRIBER GR	30.21	Base Rate Fee Seco	nd Group SIXTEENTH CNS1	\$ SUBSCRIBER GROU	0.00	
Base Rate Fee First G FI COMMUNITY/ AREA CALL SIGN KSTP KMSP	DSE 0.25 1.00 0.25	\$ SUBSCRIBER GR	30.21 OUP DSE	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA CALL SIGN	nd Group SIXTEENTH CNS1 DSE	\$ SUBSCRIBER GROU	DSE	

LEGAL NAME OF OWNE ACE TELEPHONE			•			S	YSTEM ID# 62403	Name
				TE FEES FOR EACH				
SEVEN	NTEENTH	SUBSCRIBER GRO	UP	i e		SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA	CNS2			COMMUNITY/ AREA	CNS3			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
KSTP	0.25							Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
					<u></u>			Stations
	.							
	 							
					<u></u>			
Fotal DSEs			0.25	Total DSEs			0.00	
Gross Receipts First Gr	oun	s 1	,563.96	Gross Receipts Seco	nd Group	\$	290.64	
Gioss Receipts Filst Gi	oup	<u> </u>	,505.90	Gloss Receipts Seco	na Group	3	230.04	
Base Rate Fee First Gr	oup	\$	14.66	Base Rate Fee Second	nd Group	\$	0.00	
NIN	ITEENTH	SUBSCRIBER GRO	UP	Т	WENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	•							
	.							
	 							
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
							,	

LEGAL NAME OF OW ACE TELEPHON						S	62403	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		Ħ		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
		-						and
		-						Syndicated
								Exclusivity Surcharge
		-						for
		-						Partially
								Distant
								Stations
		-						
Total DSEs		!!-	0.00	Total DSEs		-!-!	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWE	NTY-THIRD	SUBSCRIBER GRO	DUP	ti e		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
			_		_			
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	s above.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP TWENTY-FIFTH SUBSCRIBER GROUP TWENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
	9
	Computation
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	of
	Base Rate F
	and
	Syndicated Exclusivity
	Surcharge
	for
	Partially
	Distant
	Stations
Total DSEs 0.00 Total DSEs 0.00	
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	
TWENTY-SEVENTH SUBSCRIBER GROUP TWENTY-EIGHTH SUBSCRIBER GROUP	
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
Total DSEs 0.00 Total DSEs 0.00	
Total DSEs Oncore Receipts Third Group Total DSEs Oncore Receipts Fourth Group Gross Receipts Fourth Group Total DSEs Oncore Receipts Fourth Group Total DSEs Oncore Receipts Fourth Group Total DSEs Oncore Receipts Fourth Group	

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name ACE TELEPHONE ASSOCIATION 62403 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 mustalso compute a 9 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 First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** 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. 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 **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. 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 computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE 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 Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name ACE TELEPHONE ASSOCIATION 62403 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 mustalso compute a 9 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 First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** 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. 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 **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name ACE TELEPHONE ASSOCIATION 62403 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 mustalso compute a 9 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 First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** 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. 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 **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name ACE TELEPHONE ASSOCIATION 62403 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 mustalso compute a 9 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 First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** 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. 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 **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name ACE TELEPHONE ASSOCIATION 62403 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 mustalso compute a 9 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 First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** 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 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 **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH 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 Second Group NINEENTH SUBSCRIBER GROUP TWENTYTH 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 Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name ACE TELEPHONE ASSOCIATION 62403 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 mustalso compute a 9 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 First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** 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 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 **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. TWENTY-FIRST SUBSCRIBER GROUP TWENTY-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 computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group TWENTY-THIRD SUBSCRIBER GROUP TWENTY-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 Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown