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.

for Secondary Transmissions by Cable Systems (Long Form)

STATEMENT OF ACCOUNT

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

FOR COPYRIGHT OFFICE USE ONLY				
DATE RECEIVED	AMOUNT			
	\$			
2/14/2023	ALLOCATION NUMBER			

SA3E Long Form

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:						
Accounting Period	2022/2						
B	Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.						
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM						
	Midcontinent Communications						
				682020222 6820 2022/2			
	PO Box 5040						
	Sioux Falls, SD 57117-5040						
С	INSTRUCTIONS: In line 1, give any business or trade names used to	•					
	names already appear in space B. In line 2, give the mailing address of	of the system, if d	fferent from the address giver	ven in space B.			
System	Tankton, SD						
	MAILING ADDRESS OF CABLE SYSTEM: PO Box 5040 (Number, street, rural route, apartment, or suite number) Sioux Falls, SD 57117-5040						
	(City, town, state, zip code)						
D	Instructions: For complete space D instructions, see page 1b. Identify	y only the frst con	nmunity served below and r	elist on page 1b			
Area	with all communities.	I					
Served	CITY OR TOWN Yankton	STATE SD					
Community							
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#			
Sample	Alda	MD	Α	1			
Sample	Alliance	MD	В	2			
	Gering	MD	В	3			

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal 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: 6820 **Midcontinent Communications** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. SUB GRP# CITY OR TOWN **STATE** CH LINE UP **Yankton** SD AA **First** Gayville SD AA 1 Community Meckling SD AA 1 Vermillion 1 SD AA **Mission Hill** SD AA 1 **Elk Point** SD AC 2 See instructions for additional information on alphabetization. Add rows as necessary.

	 -	

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Midcontinent Communications

SYSTEM ID#

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.

BLC	OCK 1			BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	
Residential:	CODECINIDENC		TOTIL	OATEGORY OF SERVICE	CODECINDENC		10112	
 Service to first set 	2,890	\$	26.95	High Def Converter	3,082	\$	3.00	
 Service to additional set(s) 								
 FM radio (if separate rate) 				Nursing Homes	95	\$	13.00	
Motel, hotel	142	\$	6.00	Business Accounts	212	\$	26.95	
Commercial	580	\$	73.95					
Converter								
 Residential 	3,790	\$	3.00					
Non-residential								
		1				1		

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

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

FORM SA3E. PAGE 3.						1.			
LEGAL NAME OF OW					SYSTEM ID#	Namo			
Midcontinent					6820				
PRIMARY TRANSMITT	TERS: TELEVISIO	N							
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program by	system during thations in effect or 76.61(e)(2) and (asis, as explaine	ne accounting n June 24, 19 4), or 76.63 (i d in the next i	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrience carriage of certs (4))];	s and low power television stations) ed only on a part-time basis under eain network programs [sections and (2) certain stations carried on a cable system on a substitute program	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. • 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.									
each multicast strean cast stream as "WET	n associated with	n a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multi- ch stream separately; for example				
its community of licer on which your cable s Column 3: Indica	nse. For example system carried th te in each case v	e, WRC is Chane station. whether the station	annel 4 in Wash	nington, D.C. This ork station, an ind	tion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial cast), "I" (for independent), "I-M"				
(for independent mult For the meaning of th	ticast), "E" (for no nese terms, see station is outside	oncommercia page (v) of the the local ser	l educational), c e general instru vice area, (i.e. "	or "E-M" (for nonco ctions located in t distant"), enter "Y	ommercial educational multicast). he paper SA3 form. es". If not, enter "No". For an ex-				
Column 5: If you	have entered "Ye the distant static	es" in column on during the	4, you must co	mplete column 5, od. Indicate by en	stating the basis on which your tering "LAC" if your cable system				
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.									
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give t FCC. For Mexican or	nt entered into or d a primary transor r simulcasts, also three categories he location of ea Canadian statio	n or before Jumitter or an aso enter "E". If, see page (v), ch station. Fons, if any, givenel line-ups,	une 30, 2009, be ssociation repre you carried the of the general or U.S. stations, te the name of the use a separate	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community with space G for each	ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.				
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give t FCC. For Mexican or	nt entered into or d a primary transing r simulcasts, also three categories, the location of ea canadian station fing multiple char	n or before Jumitter or an aso enter "E". If, see page (v), ch station. Fons, if any, givennel line-ups,	une 30, 2009, be ssociation repre you carried the of the general or U.S. stations, te the name of the	etween a cable sy senting the prima channel on any o instructions locate list the communit he community with space G for each	ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.				
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give t FCC. For Mexican or	nt entered into or d a primary transity r simulcasts, also three categories, the location of eact anadian station multiple chares 2. B'CAST CHANNEL	n or before Jumitter or an aso enter "E". If, see page (v), ch station. Fons, if any, givennel line-ups, CHANNI 3. TYPE OF	une 30, 2009, be ssociation repreyou carried the of the general or U.S. stations, e the name of the use a separate LINE-UP 4. DISTANT? (Yes or No)	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.				
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. CALL SIGN	nt entered into of a primary transity of a primary of a prim	n or before Jumitter or an aso enter "E". If, see page (v), ch station. For one, if any, givennel line-ups, CHANNI 3. TYPE OF STATION	une 30, 2009, be ssociation repreyou carried the of the general or U.S. stations, he the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No)	etween a cable sy senting the prima channel on any o instructions locate list the communit he community with space G for each	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION				
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. CALL SIGN	nt entered into of a primary transity of a primary of a prim	n or before Jumitter or an aso enter "E". If, see page (v), ch station. Fons, if any, givennel line-ups, CHANNI 3. TYPE OF	une 30, 2009, be ssociation repreyou carried the of the general or U.S. stations, re the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No)	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC)				
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2	nt entered into of a primary transity of a primary of a prim	n or before Jumitter or an aspect of enter "E". If see page (v) ch station. For one, if any, given nel line-ups, CHANNI 3. TYPE OF STATION N	une 30, 2009, be ssociation repressociation repressociation repressor vou carried the of the general or U.S. stations, see the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX)	. See instructions for			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT	nt entered into of a primary transity rainful casts, also three categories, he location of earth Canadian station ing multiple charman cast CHANNEL NUMBER 46.1 46.2 11	n or before Jumitter or an aspect of enter "E". If see page (v) ch station. For one, if any, given nel line-ups, CHANNI 3. TYPE OF STATION N I N	une 30, 2009, be ssociation repressociation repressociation repressor vou carried the of the general or U.S. stations, see the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (CBS)	See instructions for additional information.			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT KELO-DT2	nt entered into of a primary transity rainful asts, also three categories, he location of earth Canadian station ing multiple charman as 2. B'CAST CHANNEL NUMBER 46.1 46.2 11 11.2	n or before Jumitter or an aspect of enter "E". If see page (v) ch station. For one, if any, given nel line-ups, CHANNI 3. TYPE OF STATION N I N I-M	une 30, 2009, be ssociation repressociation repressociation repressor vou carried the of the general or U.S. stations, see the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the mathematical which the station is identified. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (CBS) SIOUX FALLS, SD (MNT-HD)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT	nt entered into of a primary transity rainful casts, also three categories, he location of earth Canadian station ing multiple charman cast CHANNEL NUMBER 46.1 46.2 11	n or before Jumitter or an aspect of enter "E". If see page (v) ch station. For one, if any, given nel line-ups, CHANNI 3. TYPE OF STATION N I N	une 30, 2009, be ssociation repressociation repressociation repressor vou carried the of the general or U.S. stations, see the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (CBS)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT KELO-DT2	nt entered into of a primary transity rainful asts, also three categories, he location of earth Canadian station ing multiple charman as 2. B'CAST CHANNEL NUMBER 46.1 46.2 11 11.2	n or before Jumitter or an aspect of enter "E". If see page (v) ch station. For one, if any, given nel line-ups, CHANNI 3. TYPE OF STATION N I N I-M	une 30, 2009, be ssociation repressociation repressociation repressor vou carried the of the general or U.S. stations, see the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the mathematical which the station is identified. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (CBS) SIOUX FALLS, SD (MNT-HD)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT2 KELO-DT3 KSFY-DT	nt entered into of a primary transity r simulcasts, also three categories, he location of earth Canadian station ing multiple charman canadian station in multiple charman canadian station multiple charman canadian multiple charman canadian multiple charman canadian canadi	n or before Jumitter or an aspect of enter "E". If see page (v) ch station. For one, if any, given nel line-ups, CHANNI 3. TYPE OF STATION N I N I-M N-M	une 30, 2009, be ssociation repressociation repressociation repressor vou carried the of the general or U.S. stations, see the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (CBS) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (WEATHER)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT2 KELO-DT3 KSFY-DT KSFY-DT2	nt entered into of a primary transity r simulcasts, also three categories, the location of ear Canadian station ing multiple charman change with the control of the control	n or before Jumitter or an aspect of enter "E". If see page (v) ch station. For one, if any, given nel line-ups, CHANNI 3. TYPE OF STATION N I N I-M N-M N-M	une 30, 2009, be sociation representation representation representation representation (Inc.) of the general or U.S. stations, the the name of the use a separate of the separ	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (CBS) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (ABC)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT KELO-DT3 KSFY-DT KSFY-DT2 KSFY-DT2 KSFY-DT3	nt entered into of a primary transit r simulcasts, also three categories, the location of ear Canadian station ing multiple charged CHANNEL NUMBER 46.1 46.2 11 11.2 11.3 13.13	n or before Jumitter or an aspect of enter "E". If see page (v) ch station. For one, if any, given nel line-ups, CHANNI 3. TYPE OF STATION N I N I-M N-M N-M N I-M	une 30, 2009, be sociation representation representation representation representation (Inc.) of the general or U.S. stations, the the name of the use a separate of the separ	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (CBS) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (ABC) SIOUX FALLS, SD (CW)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT3 KSFY-DT3 KSFY-DT3 KSIN-DT	nt entered into of a primary transity r simulcasts, also three categories, the location of ear Canadian station ing multiple charman characteristics. 2. B'CAST CHANNEL NUMBER 46.1 46.2 11 11.2 11.3 13.1 13.1 13.1	n or before Jumitter or an aspenter "E". If see page (v) ch station. For one, if any, given nel line-ups, CHANNI 3. TYPE OF STATION N I N I-M N-M N-M N-M I-M I-M I-M I-M I-M	une 30, 2009, be sociation representation representation representation representation (Inc.) of the general or U.S. stations, the the name of the use a separate of the separ	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (CBS) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (ABC) SIOUX FALLS, SD (CW) SIOUX FALLS, SD (ME TV)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT KELO-DT KELO-DT3 KSFY-DT KSFY-DT2 KSFY-DT3 KSIN-DT KTIV-DT	nt entered into of a primary transit r simulcasts, also three categories, the location of ear Canadian statio ting multiple charman multiple c	n or before Jumitter or an aspenter "E". If see page (v) ch station. For one, if any, given nel line-ups, CHANNI 3. TYPE OF STATION N I-M N-M N-M N-M N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	une 30, 2009, be sociation representation representation representation representation of the general or U.S. stations, see the name of the use a separate of the separate of	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (CBS) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (ABC) SIOUX FALLS, SD (CW) SIOUX FALLS, SD (ME TV) SIOUX CITY, IA (PBS)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT3 KSFY-DT KSFY-DT2 KSFY-DT3 KSIN-DT KTIV-DT KDLT-DT3 KSIN-DT KTIV-DT	nt entered into of a primary transit of a primary transit r simulcasts, also three categories, the location of eath Canadian station ing multiple charman change of the control of the con	n or before Jumitter or an aspect of enter "E". If see page (v) ch station. For ons, if any, givenel line-ups, CHANNI 3. TYPE OF STATION N I N I-M N-M N-M N I-M N I-M E N	une 30, 2009, be ssociation repressociation re	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (CBS) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (ABC) SIOUX FALLS, SD (CW) SIOUX FALLS, SD (ME TV) SIOUX FALLS, SD (ME TV) SIOUX CITY, IA (PBS) SIOUX CITY, IA (NBC)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT3 KSFY-DT KSFY-DT2 KSFY-DT3 KSIN-DT KTIV-DT KDLT-DT3 KTIV-DT KDLT-DT3 KTIV-DT KTIV-DT KTIV-DT KDLT-DT3	nt entered into of a primary transic r simulcasts, also three categories, the location of each Canadian station multiple charms and the conting multiple charms are categories. 2. B'CAST CHANNEL NUMBER 46.1 46.2 11 11.2 11.3 13.2 13.3 28 14 46.3	n or before Jumitter or an associated enter "E". If see page (v) ch station. For ons, if any, givenel line-ups, CHANNI 3. TYPE OF STATION N I N I-M N-M N-M N I-M	une 30, 2009, be ssociation representation representation of the general or U.S. stations, rethe name of the use a separate of the separate of	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (CBS) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MEATHER) SIOUX FALLS, SD (CW) SIOUX FALLS, SD (ME TV) SIOUX FALLS, SD (ME TV) SIOUX CITY, IA (PBS) SIOUX FALLS, SD (ANTENNA) SIOUX FALLS, SD (ANTENNA) SIOUX FALLS, SD (THIS TV)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT3 KSFY-DT KSFY-DT2 KSFY-DT3 KSFY-DT3 KSIN-DT KTIV-DT KDLT-DT3 KTIV-DT KDLT-DT3 KSIN-DT KTIV-DT KDLT-DT3 KSIN-DT	nt entered into of a primary transic r simulcasts, also three categories, the location of each Canadian station multiple charms and the simulation of each Canadian station multiple charms are careful and the simulation of each canadian station in multiple charms are careful and the simulation of each canadian station in multiple charms are careful and the simulation of each canadian station are careful and the simulation of each careful and the simulation of each canadian station of each careful and the simulation of each careful and t	n or before Jumitter or an aspect of enter "E". If any, given station. For one, if any, given el line-ups, CHANNI 3. TYPE OF STATION N I-M N-M N-M N-M I-M I-M I-M E N I-M E N I-M E	une 30, 2009, be ssociation representation representation for the general or U.S. stations, rethe name of the use a separate of the separate o	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (CBS) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (WEATHER) SIOUX FALLS, SD (CW) SIOUX FALLS, SD (ME TV) SIOUX FALLS, SD (ME TV) SIOUX CITY, IA (PBS) SIOUX FALLS, SD (ANTENNA) SIOUX FALLS, SD (THIS TV) VERMILLION, SD (PBS)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT3 KSFY-DT3 KSFY-DT2 KSFY-DT3 KSFY-DT3 KSIN-DT KTIV-DT KDLT-DT3 KTIV-DT KDLT-DT3 KSFY-DT3 KSIN-DT KUSD-DT KUSD-DT	nt entered into of a primary transit r simulcasts, also three categories, the location of each Canadian stationing multiple charmage. 2. B'CAST CHANNEL NUMBER 46.1 46.2 11 11.2 11.3 13.1 13.2 13.3 28 14 46.3 7.2 34 34.2	n or before Jumitter or an aspect of enter "E". If any, given the station. For one, if any, given the line-ups, and the station of the station. For one, if any, given the line-ups, and the station of the station. The station of the	une 30, 2009, be ssociation representation representation for U.S. stations, reter the name of the use a separate of the separ	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. It is to which the station is licensed by the many which the station is identifed. It is channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (GBS) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MEATHER) SIOUX FALLS, SD (ABC) SIOUX FALLS, SD (CW) SIOUX FALLS, SD (ME TV) SIOUX FALLS, SD (ME TV) SIOUX CITY, IA (PBS) SIOUX CITY, IA (NBC) SIOUX FALLS, SD (ANTENNA) SIOUX FALLS, SD (THIS TV) VERMILLION, SD (PBS) VERMILLION, SD (PBS)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT KELO-DT KELO-DT3 KSFY-DT KSFY-DT2 KSFY-DT3 KSIN-DT KTIV-DT KDLT-DT3 KTIV-DT KDLT-DT3 KSIN-DT KUSD-DT2 KUSD-DT2 KUSD-DT2	nt entered into of a primary transit r simulcasts, also three categories, the location of each Canadian station multiple charms and the simulation of the si	n or before Jumitter or an associated from the content of the cont	une 30, 2009, be ssociation representation representation for the general or U.S. stations, retent end of the general or U.S. stations, retent end	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. It is to which the station is licensed by the many which the station is identifed. It is channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (GBS) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (WEATHER) SIOUX FALLS, SD (GBS) SIOUX CITY, IA (GBS) SIOUX CITY, IA (GBS) SIOUX FALLS, SD (THIS TV) VERMILLION, SD (GBS)	additional information			
of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican or Note: If you are utilized. 1. CALL SIGN KDLT-DT KDLT-DT2 KELO-DT KELO-DT2 KELO-DT3	nt entered into of a primary transit r simulcasts, also three categories, the location of each Canadian stationing multiple charmage. 2. B'CAST CHANNEL NUMBER 46.1 46.2 11 11.2 11.3 13.1 13.2 13.3 28 14 46.3 7.2 34 34.2	n or before Jumitter or an aspect of enter "E". If any, given the station. For one, if any, given the line-ups, and the station of the station. For one, if any, given the line-ups, and the station of the station. The station of the	une 30, 2009, be ssociation representation representation for U.S. stations, reter the name of the use a separate of the separ	etween a cable system of the primary channel on any of instructions located list the community with space G for each 5. BASIS OF CARRIAGE	ry transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. It is to which the station is licensed by the many which the station is identifed. It is channel line-up. 6. LOCATION OF STATION SIOUX FALLS, SD (NBC) SIOUX FALLS, SD (FOX) SIOUX FALLS, SD (GBS) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MNT-HD) SIOUX FALLS, SD (MEATHER) SIOUX FALLS, SD (ABC) SIOUX FALLS, SD (CW) SIOUX FALLS, SD (ME TV) SIOUX FALLS, SD (ME TV) SIOUX CITY, IA (PBS) SIOUX CITY, IA (NBC) SIOUX FALLS, SD (ANTENNA) SIOUX FALLS, SD (THIS TV) VERMILLION, SD (PBS) VERMILLION, SD (PBS)	additional information			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 6820 **Midcontinent Communications** PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. **Transmitters:** Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program **Television** basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA Page 2 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) **KWSD-DT** 36.1 ı NO SIOUX FALLS, SD KTTW-DT1 7 NO SIOUX FALLS, SD (TCT) ı KELO-DT4 11.4 I-M NO SIOUX FALLS, SD (ION-MYSTERY

FORM SA3E, PAGE 3.	ACCOUNTIN	NG PERIOD: 2022
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Midcontinent Communications	6820	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power telecarried by your cable system during the accounting period, except (1) stations carried only on a part-tim FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network prograr	e basis under	G
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 static 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 s		Primary Transmitters Television
pasis under specific FCC rules, regulations, or authorizations:	aboutate program	relevision
Do not list the station here in space G—but do list it in space I (the Special Statement and Program Lo station was carried only on a substitute basis.	og)—if the	
 List the station here, and also in space I, if the station was carried both on a substitute basis and also basis. For further information concerning substitute basis stations, see page (v) of the general instruction. 		

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).

in the paper SA3 form.

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.

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
KCAU-DT1	9.1	N	NO		SIOUX CITY, IA (ABC)
KCAU-DT2	9.2	I-M	NO		SIOUX CITY, IA (COURT TV MYS)
KCAU-DT3	9.3	I-M	NO		SIOUX CITY, IA (LAFF)
KCAU-DT4	9.4	I-M	NO		SIOUX CITY, IA (BOUNCE TV)
KPTH-DT	44.1	I	NO		SIOUX CITY, IA (FOX)
KPTH-DT2	44.2	I-M	NO		SIOUX CITY, IA (TBD/MYNETTV)
KPTH-DT3	44.3	N	NO		SIOUX CITY, IA (CBS)
KSIN-DT	28	E	NO		SIOUX CITY, IA (PBS)
KSIN-DT2	28.2	E-M	NO		SIOUX CITY, IA (PBS KIDS)
KSIN-DT3	28.3	E-M	NO		SIOUX CITY, IA (PBS WORLD)
KTIV-DT	14	N	NO		SIOUX CITY, IA (NBC)
KTIV-DT3	14.3	I-M	NO		SIOUX CITY, IA (ME TV)
KTIV-DT4	14.4	I-M	NO		SIOUX CITY, IA (COURT TV)
KTIV-DT2	14.2	I-M	NO		SIOUX CITY, IA (CW HD)
KUSD-DT	34	Е	YES	0	VERMILLION, SD (PBS)

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 6820 **Midcontinent Communications** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary Transmitters:** receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). LOCATION OF STATION **CALL SIGN** AM or FM S/D **CALL SIGN** AM or FM S/D LOCATION OF STATION

FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 2022/2

LEGAL NAME OF OWNER OF		TEM:				S	YSTEM ID#	Name
Midcontinent Commu	nications						6820	Name
SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	ENT AND PROGRAM LO	G				
In General: In space I, ident substitute basis during the a explanation of the programm form.	ccounting p	eriod, under sp	ecific present and former F0	CC rules, regu	ulations, or a	uthorizations	. For a further	Substitute
1. SPECIAL STATEMEN	T CONCEI	RNING SUBS	TITUTE CARRIAGE					Carriage: Special
During the accounting pe broadcast by a distant sta	•	ur cable systeı	m carry, on a substitute ba	sis, any non	network tele	vision progr Yes		Statement and Program Log
Note: If your answer is "No log in block 2. 2. LOG OF SUBSTITUT		•	age blank. If your answer i	s "Yes," you	must compl	ete the prog	ram	
In General: List each subsclear. If you need more spaced column 1: Give the title period, was broadcast by a under certain FCC rules, rescaled form for futher informatitles, for example, "I Love Column 2: If the prograce Column 3: Give the call Column 4: Give the broad the case of Mexican or Caled Column 5: Give the mofirst. Example: for May 7 gives the column 6: State the time to the nearest five minutes stated as "6:00–6:30 p.m."	stitute prograce, please of every not distant stategulations, of ation. Do not be adcast stategulation statement and day five "5/7." The when the complement of the and regulation of the and regulati	am on a sepai attach addition connetwork telection and that your or authorization ot use general BA Basketball adcast live, ent station broaddion's location (ons, if any, the when your syone substitute pro a program car elisted programions in effect of	nal pages. vision program (substitute our cable system substitutes. See page (vi) of the gecategories like "movies", 76ers vs. Bulls." er "Yes." Otherwise enter casting the substitute program the community to which the community with which the stem carried the substitute or carried by a system from 6:00 m was substituted for program the accounting period	program) the ted for the program instruction "basketba" "No." ram. The station is less that it is program. Use the program. Use program. Use the program in	at, during the ogramming stions located in the list specification of t	e accounting of another so d in the paperific program the FCC or, as, with the matrices accurate should be a marked program the listed program to the second the seco	g station er n in nonth ately ired	
S	UBSTITUT	E PROGRAM	1		EN SUBSTI		7. REASON	
TITLE OF PROGRAM		3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		IMES - TO	FOR DELETION	
	100 01 110	O/ILL SIGIT	i. sixtisit s Essixiisit	71112 2711	-	_		
					_			
						_		
					_	_		
						_		
					-			
					-	_		
					-			
					-	_		
					-	_		
					_			
						_		
					_			İ

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 6820 **Midcontinent Communications** PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in 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** DATE **FROM** TO TO

LEGA	AL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name
Mic	continent Communications		6820	Name
Inst all a (as	COSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's second dentified in space E) during the accounting period. For a further explanation of how to be (vii) of the general instructions.	ondary transmis	sion service	K Gross Receipts
IMP	Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	\$ (Amount of	802,323.41 f gross receipts)	
COPY Instru • Con • Con • If you fee :	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the ar from block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable par pampanying this form and attach the schedule to your statement of account.	mount of the mir	nimum	Copyright Royalty Fee
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	e entered on lin	e 1 of	
▶ If pa	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered on line 2	2 in block	
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be entered o	on line	
	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.	e is 1.064 perce	nt of the	
	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.	<u></u>	802,323.41	
	This is your minimum fee.	\$	8,536.72	
	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 colun "Yes" in this block. • Did your cable system carry any distant television stations during the accounting perion X Yes—Complete the DSE schedule. No—Leave block 3 below blank and columns are considered.	nn 4, you must o	check	
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	\$	45.65	
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00	
	Line 3. Add lines 1 and 2 and enter here	\$	45.65	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$	8,536.72	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 zero.	r	0.00	submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	_\$	725.00	additional fees. Division for the appropriate
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	9,261.72	form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See page (i) of	the	auditional 1865.

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 8.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Midcontinent Communications	6820
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
	1. Enter the total number of channels on which the cable system carried television broadcast stations	
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations 395	
	and nonbroadcast services	
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
for Further Information	Name Rachel Meyer Telephone 952-844-2655	
Information	Address 3600 Minnesota Drive, STE 700 (Number, street, rural route, apartment, or suite number)	
	Edina, MN 55435	
	(City, town, state, zip)	
	Email rachel.meyer@midco.com Fax (optional)	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable syste in line 1 of space B.	m
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	/s/ Rachel Meyer	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	"F2"
	Typed or printed name: Rachel Meyer	
	Title: Director of Programming (Title of official position held in corporation or partnership)	
	Date: February 13, 2023	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nome
Midcontinent Communications	6820	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright A lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable sy service of providing secondary transmissions of primary broadcast transmitters, the system scribers and amounts collected from subscribers receiving secondary transmissions pursu. For more information on when to exclude these amounts, see the note on page (vii) of the general	stem for the basic n shall not include sub- ant to section 119."	Special Statement Concerning Gross Receipts
paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for second by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below		Exclusion
Name Mailing Address Mailing Address 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 For an explanation of interest assessment, see page (viii) of the general instructions in the paper s		Q
Line 1 Enter the amount of late payment or underpayment	x	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here		
Line 3 Multiply line 2 by the number of days late and enter the sum here	xdaysx 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	- (interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For furnest contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	ther assistance 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 Coplease list below the owner, address, first community served, accounting period, and ID number a filing.		
Owner		
Address		
First community served Accounting period ID number		

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

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical value given by the Copyright Act to each distant television station carried by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

FORMULAS FOR COMPUTING A STATION'S DSE

There are two different formulas for computing DSEs: (1) a basic formula for all distant stations listed in space G (page 3), and (2) a special formula for those stations carried on a substitute basis and listed in space I (page 5). (Note that if a particular station is listed in both space G and space I, a DSE must be computed twice for that station: once under the basic formula and again under the special formula. However, a station's total DSE is not to exceed its full type-value. If this happens, contact the Licensing Division.)

BASIC FORMULA: FOR ALL DISTANT STATIONS LISTED IN SPACE G OF SA3E (LONG FORM)

Step 1: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of account (page 3), a distant station is:

• Independent: its type-value is	1.00
• Network: its type-value is	0.25
• Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing DSEs	

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

DSE SCHEDULE. PAGE 11.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

- 5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

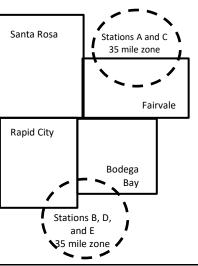
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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	1	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000,00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6 384 00

			\$6,384.00			
l	First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
	(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
J	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 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	YSTEM ID#
I	Midcontinent Communic	cations				6820
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line	١.			0.25	
2	Instructions: In the column headed "Call S of space G (page 3).					
Computation of DSEs for	In the column headed "DSE" mercial educational station, giv			= as "1.0"; tor	each network or noncom-	
Category "O"			CATEGORY "O" STATION	IS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	KUSD-DT	0.250				
۸ ما ما سعیدی م						
Add rows as						
necessary. Remember to copy						
all formula into new						
rows.						

						1

	 	=	 	
1				

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#										
Name	Midcontinen	Midcontinent Communications 6820									
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	st the call signs the call signs correspond in Foreach signs can be called at least to the called as ".2 in Multiply the calle	gn of all dista station, give the with the infor station, give the figure in colu the third decire ndependent states 5."	he number of mation given he total numburn 2 by the mal point. This station, give the lumn 4 by the	hours y in space er of ho figure in s is the ' he "type	our cable systeme J. Calculate on urs that the state column 3, and gradies of carriage-value" as "1.0."	nly one DSE for ion broadcast over the result in e value" for the in For each netwo	ation during each station ver the air decimals station. ork or nonc	g the accounting	nting period. s figure must ational station, ess than the	
Capacity	CATEGORY LAC STATIONS: COMPUTATION OF DSEs										
	1. CALL SIGN		2. NUMBE OF HOL CARRIE SYSTEM	R JRS ED BY	3. NL OF ST	IMBER HOURS ATION I AIR	4. BASIS O CARRIAC VALUE	F	5. TYPE VALUE	6. DS	E
				÷			=		x	=	
				÷			=		X	=	
				÷			=		X	=	
				÷			=		X	=	
				÷			=		X X	=	
				÷			=		X	=	
	SUM OF DSEs Add the DSEs Enter the su	of each stat	ion.		chedule		▶		0.00		
Computation of DSEs for Substitute-Basis Stations	 Was carried tions in effections in effections. Broadcast of space I). Column 2: If at your option. Column 3: If Column 4: If Column 4: If /li>	d by your systect on Octobone or more For each standard	stem in substorer 19, 1976 (live, nonnetwood ation give the should correst umber of days gure in colum	itution for a p as shown by ork programs number of liv spond with the in the calend nn 2 by the fig	rogram the lette during the re, nonn e inform dar year lure in c	that your systen r "P" in column nat optional carr etwork program ation in space I. 365, except in olumn 3, and given.	7 of space I); an iage (as shown by s carried in substance a leap year.	to delete u d / the word stitution for olumn 4. F	under FCC rules a "Yes" in column 2 a r programs that w Round to no less	of vere deleted	m).
			SU	BSTITUTE	-BASI	S STATION	S: COMPUTA	ATION C	OF DSEs		
	1. CALL SIGN	2. NUMB OF PROG		3. NUME OF DA IN YEA	YS	4. DSE	1. CALL SIGN	0	UMBER F ROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			÷		=				÷		=
			÷		=				÷		=
			÷		=				÷		=
			÷		=				÷		
	SUM OF DSEs Add the DSEs Enter the su	of each stat	ΓΙΤ UTE-BASI ion.				▶		0.00		
5	TOTAL NUMBE				e boxes	in parts 2, 3, and	l 4 of this schedu	le and add	them to provide t	he total	
Total Number	1. Number of DSEs from part 2 ● ▶ 0.25										
of DSEs	2. Number o	f DSEs from	part 3 ●					<u> </u>		0.00	
	3. Number of DSEs from part 4 ● ▶ 0.00									0.00	
									Γ		
	TOTAL NUMBE	R OF DSEs							<u> </u>		0.25

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

	OWNER OF CABLE Communication						Š'	4820 6820	Namo
nstructions: Bloo	ck A must be com	oleted.							
n block A:	"Yes," leave the re		part 6 and part	7 of the DSE sche	edule blank ar	nd complete pa	art 8. (page 16) of	the	6
chedule.	"No," complete blo	·	·				o, (pago 10) o.		
ii your answer ii	No, complete bic			ELEVISION M	ARKETS				Computation
•	m located wholly o	utside of all ı	major and sma	ller markets as de	fined under se	ection 76.5 of F	CC rules and reg	julations in	3.75 Fee
ffect on June 24, Yes—Com	nplete part 8 of the	schedule—[DO NOT COM	PLETE THE REMA	AINDER OF F	PART 6 AND 7	,		
	lete blocks B and								
		BI OC	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			_
Column 1:	List the call signs			part 2, 3, and 4 of			tem was permitted	d to carry	1
CALL SIGN	under FCC rules	and regulations Be DSE Sche	ons prior to Jui dule. (Note: Ti	ne 25, 1981. For fune letter M below r	urther explana	ation of permitt	ed stations, see th	ne	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions for E Carried pursua *F A station pre	ales and regued pursuant on as defined al education of station (76. or DSE schedant to individuously carries of the station of	lations cited by to the FCC mand d in 76.5(kk) (7 al station [76.5 65) (see parago dule). ual waiver of F ed on a part-ting within grade-B	ne or substitute ba contour, [76.59(d)(rese in effect of 76.57, 76.59(b 76.57), 76.63(a 76.63(a) referring betitution of g	n June 24, 198 b), 76.61(b)(c), a) referring to 7 g to 76.61(d)] randfathered s	76.63(a) referring 6.61(e)(1) tations in the		
Column 3:	*(Note: For those this schedule to	e stations ide determine the	entified by the I	n parts 2, 3, and 4 etter "F" in column	2, you must	complete the v	1	1	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
·····									_
								0.00	-
		В	BLOCK C: CC	MPUTATION O	F 3.75 FEE				_
ine 1: Enter the	e total number of	DSEs from	part 5 of this	schedule			***		
ne 2: Enter the	sum of permitte	d DSEs fro	m block B ab	ove			ur-		
	line 2 from line 1 eave lines 4–7 b			•		ō rate.	u -		
ne 4: Enter gro	oss receipts from	space K (p	page 7)				x 0.03	375	Do any of the DSEs represe partially
ne 5: Multiply I	ine 4 by 0.0375	and enter s	um here				X		permited/ partially nonpermitte
ne 6: Enter tota	al number of DS	Es from line	e 3						carriage? If yes, see pa 9 instructions

EGAL NAME OF (Communication	ons						6820	Name	
BLOCK A: TELEVISION MARKETS (CONTINUED)										
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6	
									Computation 3.75 Fee	
							•			

Name	Midcontinent C									4STEM ID#: 6820
Worksheet for Computating the DSE Schedule for Permitted 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. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 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 entere 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.									
		DEDMITT	ED DSE EOD STA	TIONS CADDIS	- D /	ON A DART TIME AN	ID SLIBSTI	TI ITE DAGIC		
	1. CALL SIGN	2. PRIC	OR 3. ACC	COUNTING ERIOD	יטב	4. BASIS OF CARRIAGE	5. PF	RESENT DSE	6. P	ERMITTED DSE
	OION	DOL				OANNAOL		JOL		DOL
7 Computation of the Syndicated	Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. BLOCK A: MAJOR TELEVISION MARKET									
Exclusivity Surcharge	• Is any portion of the o	cable system w	ithin a top 100 majo	or television mar	ket	as defned by section 7	6.5 of FCC	rules in effect J	une 24,	1981?
	Yes—Complete	blocks B and	C .			X No—Proceed to	part 8			
	BLOCK B: Ca	arriage of VHF	/Grade B Contour	Stations		BLOCK	(C: Compu	ıtation of Exem _l	ot DSEs	;
	Is any station listed in commercial VHF stati or in part, over the ca	on that places	•		r	Was any station listed nity served by the cabl to former FCC rule 76.	le system p		-	
	Yes—List each si		n its appropriate pern art 8.	nitted DSE		Yes—List each sta X No—Enter zero ar			te permi	tted DSE
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N	DSE
		-						-		
								-		
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Midcontinent Communications	SYSTEM ID# 6820	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	802,323.41	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero , proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. 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 DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1) \$		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here	_	
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE .	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

ACCOUNTING PERIOD: 2022/2

DSE SCHEDULE PAGE 16

Name		ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	I	Midcontinent Communications	6820
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	
		F. Multiply line D by line E and enter here	_
		G. Add lines A, C, and F. This is your surcharge.	
		Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge \$\bigs\text{\$\sum_{\text{space}}\$}\$	
	Instru	ctions:	
8	You m	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of pa	rt
		checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation		ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of		ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belo)W
Base Rate Fee	blank What i	 is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	al
	service	e 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. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ \$ 802,323.4	<u> 11 </u>
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes,"	00
	_	use the total number of DSEs from part 5.)	.00
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1)	
		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	<u></u> .

U.S. Copyright Office

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: Midcontinent Communications	SYSTEM ID# 6820	Name
Section If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		
A. Enter 0.01064 of gross receipts (the amount in section 1)		8
B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$		Computation of
C. Multiply line B by 3.000 and enter here ▶		Base Rate Fee
D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$		
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here ▶		
F. Multiply line D by line E and enter here \$		
G. Add lines A, C, and F. This is your base rate fee.		
Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$	0.00	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reported number in Space C	_	9
ups in Space G. In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base receipts from subscribers located within the station's local service area, from your system's total gross receipts. This exclusion, you must:		Computation of Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. D DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fees for each subscriber group. That total is the base rate fee for your system.	etermine the number of te fee for each group.	and Syndicated Exclusivity Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exmust also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both blo However, if your cable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant to that community.	istant station you	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscriber outside the station's local service area. A subscriber located outside the local service area of a station is distant to the same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations system will have only one subscriber group when the distant stations it carried have local service areas that coincidents.	s. Note that a cable	
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of subscriber groups.	your system's	
In each section:		
 Identify the communities/areas represented by each subscriber group. Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is dissubscribers in the group. 	stant to all of the	
 If: 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you and 4 of this schedule; or, 	ı gave it in parts 2, 3,	
2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gapart 6 of this schedule.	ave it in block B,	
• Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
 Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the in the paper SA3 form. 	general instructions	
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedul page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You depoin your actual calculations on the form.	group (that is, the total	

ACCOUNTING PERIOD: 2022/2

DSE SCHEDULE. PAGE 18.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS	TEM ID#
	Midcontinent Communications	6820
	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.	
	transmitter of an association representing the primary transmitter.	

LEGAL NAME OF OWNE Midcontinent Con						S	YSTEM ID# 6820	Name
В		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EAC		BER GROUP SUBSCRIBER GRO	JP	
COMMUNITY/ AREA Yankton, SD				COMMUNITY/ AREA Elk Point, SD				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				KUSD-DT	0.25			Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.25	
Gross Receipts First G	roup	\$ 785	,160.98	Gross Receipts Sec	ond Group	\$	17,162.43	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	45.65	
COMMUNITY/ AREA	THIRD	SUBSCRIBER GROU	1P 0	COMMUNITY/ AREA		SUBSCRIBER GRO	JP 0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	

Total DSEs 0.00		_	Total DSEs			0.00		
Gross Receipts Third (3roup	\$	0.00	Gross Receipts Foul	rth Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourth Group \$ 0.0		0.00			
Base Rate Fee: Add th	ne base rat	e fees for each subsc	riber aroup	as shown in the boxes	above.			
Enter here and in block			5 1			\$	45.65	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNE			•			S	YSTEM ID# 6820	Name
В	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
FIRST SUBSCRIBER GROUP					SECOND	SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA Yankton, SD			COMMUNITY/ AREA Elk Point, SD				9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
								Otations
		-				·		
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Group \$ 785,160.98			160.98	Gross Receipts Seco	and Group	\$	17,162.43	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA 0			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 Group \$ 0.00		0.00	Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group \$		\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Page Pote Foot Add U	no hace ====	to food for each subset	ribor curr	on about in the leave	ahova			
Base Rate Fee: Add the Enter here and in block			inei gioup	as shown in the boxes	ಡು∪∨ಆ.	\$	0.00	