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.

SA1-2E Short Form

STATEMENT OF ACCOUNT			FOR COPYRIGH	Return completed workbook by email to:						
for Seconda	ny Tra	ansmissions by	DATE RECEIVED	AMOUNT	— coplicsoa@loc.gov					
Cable Syste General instru in the first tab	ictions	are located	2/24/2025	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150					
Α	ACC	OUNTING PERIOD COVERED E	Y THIS STATEMENT: (YY	YY/(Period))						
		2024/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31						
Accounting		Barcode Data Filing Period (optional - see instructions)								
Accounting Period										
B Owner		the subsidiary, not that of the parent corpo List any other name or names under which	pration. the owner conducts the business of the ccounting period, only the owner on th	on the last day of the accounting period should submit a single						
		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								
		Midcontinent Communications BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)								
		MAILING ADDRESS OF OWNER OF	CABLE SYSTEM							
		PO Box 5040 (Number, street, rural route, apartment, or suite nu	mber)							
	Sioux Falls, SD 57117-5040 (City, town, state, zip)									
С		RUCTIONS: In line 1, give any busine		ify the business and operation of the						
System	names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.									
System	1	1 IDENTIFICATION OF CABLE SYSTEM: Devils Lake, ND								
		MAILING ADDRESS OF CABLE SYSTEM:								
	2	PO Box 5040 (Number, street, rural route, apartment, or suite nu								
		Sioux Falls, SD 57117-5040	,							
1	1	(City town state zin code)								

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 Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

Name ECAL WARG OF OWER OF CALE SYSTEM SYSTEM Up Main Mathematical Communications 4930 D Indications of communications indications of communications 4930 Area Service and Addition community enrolled by the cable system. A formunity if the sume as a "community enrolled by the cable system. A formunity of the sume as a "community enrolled by the cable system and Addition (service) and an experiment of cable system and Addition (service) and an experiment of cable community or all facture fillings. Area Intervice or with a service and an experime such as hotely, apertments, condomnium, or mobile home parks should be reported in parenthese below the identified (V). First Devine Lake MD Community Devine Lake MD Addres at totath Devine Lake ND Main Devine Lake ND Main ND ND	Accounting Period:	2024/2	FORM SA1-2E. PAGE 1b.							
Midcontinent Communications 4030 Instructions: List each separate community served by the cable system. A "community" is the same as a "community and if end in FC CUIs: "a separate and distinct community or municipal entity (including unincorporated community with unincorporated areas and including single, discrete unincorporated areas), and FC FR. 75.5(d). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city. First Community CITY OR TOWN State GITY OR TOWN State ND Cando ND ND Starkweather ND ND Walhalla ND ND Walhalla ND ND	Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#							
D sparate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas), and 2.6.8.7.5.5(dd). The first community with you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Area Served CITY OR TOWN STATE First Community Devils Lake ND Community Bisbee ND Community Bisbee ND Community Starkeester ND Add Ross to Recessary Langdon ND Valiballa ND Starkeester Waliballa ND Starkeester Starkweather ND Starkeester Starkeester Starkeester </th <th>Hame</th> <th></th> <th></th>	Hame									
First Community Devils Lake ND Bisbee ND Cando ND Add Rows as Necessary Langdon ND Starkweather ND Walhalla ND	Area	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 first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified								
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Add Rows as Necessary Langdon ND Gamma Sa Necessary ND ND Walhalia ND ND ND ND ND <t< td=""><td></td><td>Bisbee</td><td>ND</td></t<>		Bisbee	ND							
Starkweather ND Walhalia ND Walhalia ND ND ND			ND							
Walhalla ND Image: Second S	Add Rows as Necessary									
		•••••••••••••••••••••••••••••••••••••••								
		vvaillalla	ND							

	FO LEGAL NAME OF OWNER OF CABLE SYSTEM:										
Name	Midcontinent Communications										
		ations									
Е	SECONDARY TRANSMISSION										
		General: The information in space E should cover all categories of secondary transmission service of the cable stem, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information									
Secondary		ervices (including pay cable) in space F, not here. All the facts you state must be those existing on the									
Transmission	last day of the accounting period							0			
Service: Sub-	Number of Subscribers: Both	•									
scribers and Rates	down by categories of secondary each category by counting the nu			0 / 1							
Nates	separately for the particular servi	-						nargeu			
	Rate: Give the standard rate cl							and the			
	unit in which it is generally billed.	•	,		ny standaro	l rate variations	s within a pa	rticular rate			
	category, but do not include disce Block 1: In the left-hand block				ion of soon	ndony transmis	sion convior	that cable			
	systems most commonly provide	•		•							
	that applies to your system. Note							0,			
	categories, that person or entity s	should be coun	ited as a	subscriber in	each appli	cable category.	Example: a	a residential			
	subscriber who pays extra for cal					in the count un	der "Service	to the			
	first set" and would be counted o Block 2: If your cable system h					envice that are	different fro	om those			
	printed in block 1 (for example, ti	•									
	with the number of subscribers a										
	sufficient.		-								
	BLC	DCK 1 NO. OF					BLOCK	. 2 NO. OF			
	CATEGORY OF SERVICE	SUBSCRIBI		RATE	CATE	EGORY OF SE	RVICE	SUBSCRIBERS	RATI		
	Residential:										
	 Service to first set 		1,227	30.00		ess Accounts			30.0		
	 Service to additional set(s) 				· · · · · · · · · · · · · · · · · · ·	gh Def Converter			3.0		
	 FM radio (if separate rate) 				Nursing	sing Homes			8.0		
	Motel, hotel		4	32.00	Hospita	ls	68	5.0			
	Commercial		222	83.00							
	Converter		1,565	3.00							
	Residential										
	Non-residential										
	SERVICES OTHER THAN SECO										
_	In General: Space F calls for rate					your cable syst	tem's servic	es that were			
F	not covered in space E, that is, th	hose services t	hat are i	not offered in a	combinatio	n with any seco	ndary trans	mission			
	service for a single fee. There are										
Services Other Than	furnished at cost or (2) services of amount of the charge and the un										
Secondary	enter only the letters "PP" in the		usually L	nieu. Il ally la	les ale cha	argeu on a vana	able per-pro	gram basis,			
ransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.										
Rates	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.										
	brief (two- or three-word) description and include the rate for each.										
		BLO RATE		ORY OF SER		RATE	BLOCK 2 CATEGORY OF SERVICE		RATE		
	CATEGORY OF SERVICE Continuing Services:	RAIE		tion: Non-res		RAIE	CATEGO	ORT OF SERVICE	RAIL		
	• Pay cable	16.00		el, hotel	luonnai	499.00	Digital ²	1	10.0		
	• Pay cable—add'l channel	10.00		nmercial	499.00				16.0		
	• Fire protection			cable			Showtime		16.0		
	•Burglar protection			cable-add'l ch	annel		Starz!&Encore		16.0		
	Installation: Residential		-	protection			Digital Variety		4.0		
	• First set	50.00		glar protection			Digital Espanol		5.0		
	Additional set(s)	25.00		ervices:			······	orts&Variety	11.0		
	• FM radio (if separate rate)	25.00		onnect		150.00	Sig opt				
	Converter			connect							
	Convertor					-	······				
				et relocation							
				et relocation e to new addr	ess	25.00 25.00					

Midcontinent Communications PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(d)(2) and (4), 76,61(e)(2) and (4)); and (2) certain stations regrame basis stations: with respect to any distant stations: explained (v) of the general and program basis and also on some other basis. For thirther information concerning subtitule basis tations, see page (v) of the general network station, error and with a station accurring to the station is a network station, see nape (v) of the general network multicast; there are sacolated with a station accurring to the station, 10 to report multistream "WETA-2" as the same on the form. Column 1: List each station, 'Cell channel at in Washington, D.C. Column 2: Give the channel number the FCC assigned to the television station, an independent, "LMM" (for independent), "LMM" (for independent), "LMM" (for independent), "L	N	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM					
G In General: In space G, identify every lelevision station (including translator stations and low power television stations) control to your cable system during the accounting period. scrept (1) stations carried by your cable system during the accounting period. scrept (1) stations carried by your cable system during the accounting period. scrept (1) stations carried by your cable system during the accounting period. scrept (1) stations carried by your cable system during the accounting period. scrept (1) stations carried by your cable system during the accounting period. scrept (1) stations carried by your cable system on a substitute basis stations. Scrept (1) substitute basis stations carried by your cable system during the station accounting period. Scrept (1) substitute basis stations carried by your cable system during the station accounting period. Scrept (1) substitute basis station (1) substitute basis and as on some other basis and station scale (1) the station was carried only on a substitute basis and also on some other basis. For further information cancerning substitute basis station, for during (1) substitute basis and also on some other basis. Scrept (1) the station accounting period. Scrept (1) substitute basis and also on some other basis. For further information character (1) the television station. For during (1) substitute basis and also on some other basis. For further information character with the station is a nucleopendent station. For during (1) substitute basis and also on some other basis. For a sample, which is character avelation basis stations (1). The information count of the station is a nucleopendent station. For during (1) substitute basis stations (1), and (1) substitute basis stations (1). The information count of the station is a nucleopendent station. For during (1), and (2) substitute basis stations (1), and (2) substitute basis stations (1). The information count of the statis is stating (1) the station is nucleopendent stations.	Name	Midcontinent Communications								
Generative by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FC rules and requisitions in effect on rule 24, 1981, perioding the carriage of certain network programs [sections 76,56(6)(2) and (4), 76.61(e)(2) and (4), or 76.83 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as acplained in the next paragraph. Substitute Dasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: - Do not list the station here in space C – Dut do list it in space 1 (the Special Statement and Program Log).—If the station was carried only on a substitute basis. -1 List the station here in space L if the station was carried both on a substitute program basis is under specific FCC rules, regulations, or authorizations: - Do not list the station here in space L if the station was carried both on a substitute program have basis. For further information concerning substitute basis stations, are page (v) of the general inductorism. For there information concerning substitute basis stations, are page (v) of the general inductorism. For the carrier of the spece SAL (V), the station is a network station, an independent station, or a nonomuncial educational station, etc. (V). The fore the station is independent station, or a nonomuncial educational station is direct VI. Stations, Network multicast), Tel (rindependent), Tel (rindependent multicast), E (or noncommercial educational, or 25.47 (for noncommercial educational multicast), FCC. For Mexican of Canadian stations, if any, give the name of the community with which the station is identified. Notes at Network 1. CALL SIGN 2. B'CAST CHANNEL NUMBER 3. TYPE OF STATION 4. LOCATION OF STATION (K) RPGO, ND (C) (K) (K) (P) (PRIMARY TRANSMITTERS: TELEVISION								
KBRR-DT10ITHIEF RIVER FALLS, MN(FOX KBRR-DT2KBRR-DT210.2I-MTHIEF RIVER FALLS, MN(ANT THIEF RIVER FALLS, MN(ANT KMDE-DTKMDE-DT25EDEVILS LAKE, ND (PBS)KMDE-DT225.2E-MDEVILS LAKE, ND (PBS WRLD KMDE-DT3KMDE-DT325.3E-MDEVILS LAKE, ND (PBS MN HD KMDE-DT4KMDE-DT425.4E-MDEVILS LAKE, ND (PBS KIDS)KVLY-DT36NFARGO, ND (NBC)KVLY-DT336.2N-MFARGO, ND (CBS-KXJB)KVLY-DT336.3I-MHORACE, ND (CW)KXJB-LD230.2I-MHORACE, ND (ABC)WDA2-DT8NDEVILS LAKE, ND (ABC)WDAY-DT221.3I-MFARGO, ND(TRUE CRIME)WDAY-DT321.3I-MFARGO, ND(WDAY'Z XTRA HDKRDK-DT24IVALLEY CITY, ND (COZI TV HICKY7.1IGrand Forks, ND (BEK SportsKNGF-DT227.2I-MGrand Forks, ND (BEK Sports	Primary Insmitters:	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC ru- • Do <i>not</i> list the station her station was carried <i>only</i> or • List the station here, and basis. For further informatic Column 1: List each statio multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast) For the meaning of these to Column 4: Give the location	m during the accounting period, <i>except</i> (in effect on June 24, 1981, permitting the e)(2) and (4), or 76.63 (referring to 76.61 is explained in the next paragraph. : With respect to any distant stations car ules, regulations, or authorizations: e in space G—but do list it in space I (the a substitute basis. also in space I, if the station was carried on concerning substitute basis stations, s n's call sign. <i>Do not</i> report origination pri d with a station according to its over-the- the form. el number the FCC assigned to the telev (RC is channel 4 in Washington, D.C. acase whether the station is a network si ering the letter "N" (for network), "N-M" (for , "E" (for noncommercial educational), or erms, see page (iv) of the general instruc- in of each station. For U.S. stations, list t	(1) stations carried only on a part- e carriage of certain network progra (e)(2) and (4))]; and (2) certain stat ried by your cable system on a sub- e Special Statement and Program both on a substitute basis and als see page (v) of the general instruc- ogram services such as HBO, ES air designation. For example, rep- ision station for broadcasting over tation, an independent station, or or network multicast), "I" (for indep "E-M" (for noncommercial educat tions in the paper SA1-2 form. he community to which the station	time basis under rams [sections ations carried on a ubstitute program a Log)—if the so on some other stions. PN, etc. Identify each bort multistream r the air in its community a noncommercial bendent), "I-M" tional multicast).					
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KXJB-LD230.2I-MHORACE, ND (CW)KXJB-LD330.3I-MHORACE, ND (HEROES)WDAZ-DT8NDEVILS LAKE, ND (ABC)WDAY-DT221.2I-MFARGO, ND(TRUE CRIME)WDAY-DT321.3I-MFARGO, ND(WDAY'Z XTRA HDKRDK-DT24IVALLEY CITY, ND (COZI TV HICKY7.1IWINNEPEG, MANITOBAKVLY-DT436.4I-MFARGO, ND (The 365)KNGF-DT27.1IGrand Forks, ND (BEK SportsKNGF-DT227.2I-MGrand Forks, ND (BEK 2)		KVLY-DT3	36.3	I-M	FARGO, ND (ME TV)					
KXJB-LD330.3I-MHORACE, ND (HEROES)WDAZ-DT8NDEVILS LAKE, ND (ABC)WDAY-DT221.2I-MFARGO, ND(TRUE CRIME)WDAY-DT321.3I-MFARGO, ND(WDAY'Z XTRA HDKRDK-DT24IVALLEY CITY, ND (COZI TV HICKY7.1IWINNEPEG, MANITOBAKVLY-DT436.4I-MFARGO, ND (The 365)KNGF-DT27.1IGrand Forks, ND (BEK SportsKNGF-DT227.2I-MGrand Forks, ND (BEK 2)			30.2	I-M						
WDAZ-DT8NDEVILS LAKE, ND (ABC)WDAY-DT221.2I-MFARGO, ND(TRUE CRIME)WDAY-DT321.3I-MFARGO, ND(WDAY'Z XTRA HDKRDK-DT24IVALLEY CITY, ND (COZI TV HICKY7.1IWINNEPEG, MANITOBAKVLY-DT436.4I-MFARGO, ND (The 365)KNGF-DT27.1IGrand Forks, ND (BEK SportsKNGF-DT227.2I-MGrand Forks, ND (BEK 2)		KXJB-LD3	30.3	I-M	······					
WDAY-DT221.2I-MFARGO, ND(TRUE CRIME)WDAY-DT321.3I-MFARGO, ND(WDAY'Z XTRA HDKRDK-DT24IVALLEY CITY, ND (COZI TV HICKY7.1IWINNEPEG, MANITOBAKVLY-DT436.4I-MFARGO, ND (The 365)KNGF-DT27.1IGrand Forks, ND (BEK SportsKNGF-DT227.2I-MGrand Forks, ND (BEK 2)				N						
KRDK-DT24IVALLEY CITY, ND (COZI TV HICKY7.1IWINNEPEG, MANITOBAKVLY-DT436.4I-MFARGO, ND (The 365)KNGF-DT27.1IGrand Forks, ND (BEK SportsKNGF-DT227.2I-MGrand Forks, ND (BEK 2)		WDAY-DT2	21.2	I-M						
KRDK-DT24IVALLEY CITY, ND (COZI TV HICKY7.1IWINNEPEG, MANITOBAKVLY-DT436.4I-MFARGO, ND (The 365)KNGF-DT27.1IGrand Forks, ND (BEK SportsKNGF-DT227.2I-MGrand Forks, ND (BEK 2)		WDAY-DT3	21.3	I-M	FARGO, ND(WDAY'Z XTRA HD)					
CKY7.1IWINNEPEG, MANITOBAKVLY-DT436.4I-MFARGO, ND (The 365)KNGF-DT27.1IGrand Forks, ND (BEK SportsKNGF-DT227.2I-MGrand Forks, ND (BEK 2)				I						
KVLY-DT436.4I-MFARGO, ND (The 365)KNGF-DT27.1IGrand Forks, ND (BEK SportsKNGF-DT227.2I-MGrand Forks, ND (BEK 2)				I						
KNGF-DT27.1IGrand Forks, ND (BEK SportsKNGF-DT227.2I-MGrand Forks, ND (BEK 2)				I-M						
KNGF-DT2 27.2 I-M Grand Forks, ND (BEK 2)										
				I-M						

Accounting Perio	od: 2024/2					FO	RM SA1-2E. PAGE 5.
N	LEGAL NAME OF OWNER OF	CABLE SYST	FEM:				SYSTEM ID#
Name	Midcontinent Commur	nications					4030
Substitute Carriage:	SUBSTITUTE CARRIAGE In General: In space I, identi substitute basis during the ac explanation of the programm 1. SPECIAL STATEMENT	fy every nor ccounting pe ing that mus	nnetwork televis eriod, under spe st be included in	<i>ion program,</i> broadcast by cific present and former F(this log, see page (v) of th	a <i>distant</i> statio CC rules, regula	ations, or authorizations	. For a further
Special Statement and Program Log	• During the accounting per broadcast by a distant sta Note: If your answer is "No	iod, did you tion?	ır cable system	carry, on a substitute ba		YES	× NO
	log in block 2. 2. LOG OF SUBSTITUTE In General: List each subsi- clear. If you need more spa- Column 1: Give the title period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the call Column 4: Give the broat the case of Mexican or Can Column 5: Give the more first. Example: for May 7 give Column 5: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the letted to delete under FCC rules a was substituted for program effect on October 19, 1976.	E PROGRA itute progra ce, please of every no distant stat gulations, c ies like "mo Bulls." n was broa- sign of the : dicast static adian static th and day re "5/7." es when the Example: a er "R" if the ind regulation ming that y	MS am on a separa add additional i nnetwork telev ion and that yo or authorization ovies" or "baske dcast live, ente station broadca on's location (th ons, if any, the when your sys e substitute pro a program carri listed program ons in effect du	te line. Use abbreviations rows to the tables. ision program ("substitute ur cable system substitut s. See page (v) of the gen tabl." List specific progra r "Yes." Otherwise enter " isting the substitute progra te community to which the community with which the tem carried the substitute gram was carried by your ed by a system from 6:01 was substituted for prog- iring the accounting perio	s wherever pos e program") tha ed for the prog neral instructio am titles, for ex "No." am. e station is lice e station is lice e station is lice r cable system :15 p.m. to 6:2 ramming that y d; enter the left	asible, if their meaning at, during the accountin ramming of another st ns for further informatic ample, "I Love Lucy" o unsed by the FCC or, in thified). I List the times accurat 8:30 p.m. should be rour system was <i>requir</i> ter "P" if the listed prog	is g ation on. r r onth ely ed
		UBSTITU	WHEN SUBSTITUTE CARRIAGE OCCURRED		7. REASON FOR		
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM – TO	DELETION

Accounting P							FORM	I SA1-2E. PAGE 4
LEGAL NAME OF Midcontinen								SYSTEM ID#
macontinen	t Commun	ication	5					4030
all-band basis w	every radio s ⁄hose signals	tation ca were ger	rried on a separate and discre nerally receivable by your cabl -Band FM Carriage: Under C	e system during t	he accounting	period.		H
on the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: Si Column 3: If signal, indicate t	nonitoring, to rrmation abour m. entify the call tate whether th the radio stati this by placing	be receir t the Co sign of e he statio on's sigr g a check	tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. In is AM or FM. hal was electronically processes mark in the "S/D" column. on (the community to which the	ystem's FM ante nis point, see pag ed by the cable sy	nna, during ce le (v) of the ge ystem as a sep	rtain sta eneral in parate a	ated intervals. structions in the. nd discrete	Transmitters: Radio
			the community with which the			, in t		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Period:	2024/2			FORM	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:			:	SYSTEM ID#
	Midcontinent Communications				4030
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file ar all amounts (gross receipts) paid to your cable system by subscribers for the s (as identified in space E) during the accounting period. For a further explanation page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period	system's see	condary transmi compute this a	ssion service mount, see \$ 3	62,700.19 rross receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 See page (vi) of the general instructions located in the paper SA1-2 form for more i	but less tha nformation.	n \$527,600	63,800	
	BLOCK 1: GROSS RECEIPTS OF \$13	7,100 OR I	LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty accounting period is \$52.00	fee that you	u must pay for th	s six-month	
	Line 1. Royalty fee for accounting period				
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lin	nes 1 and 2			
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LE	SS (but mo	ore than \$137,1	00)	
	1. Base amount under statutory formula				
	2. Enter amount of gross receipts from space K				
	3. Subtract line 2 from line 1				
	4. Enter the amount of gross receipts from space K				
	5. Enter the amount from line 3				
	6. Subtract line 5 from line 4				
	7. Multiply line 6 by .005 (enter figure here)				
	8. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7	and 8			
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263	3,800 (but l	less than \$527,	600)	
	1. Enter the amount of gross receipts from space K	\$	362,700.19		
	2. Base amount under statutory formula	\$	263,800.00		
	3. Subtract line 2 from line 1	\$	98,900.19		
	4. Multiply line 3 by .01		\$	989.00	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)		\$	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8			0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4	, 5, and 6		\$	2,308.00
	FILING FEE AND TOTAL REMITTANCE DU	IE			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		. \$	2,308.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations) .		\$	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	2,328.00
	Important: Your remittance must be in the form of an electronic pay See page i of the general instructions in the paper SA1				yhts!

Accounting Period:	: 2024/2				FORM SA1-2E. PAGE 7
Name		FOWNER OF CABLE SYSTEM: t Communications			SYSTEM ID: 4030
M Channels	to its subscril 1. Enter the t system ca 2. Enter the t on which t	bers, and (2) the cable system's to otal number of channels on which rried television broadcast stations otal number of activated channels ne cable system carried television	5	counting period.	20 443
N Individual to Be Contacted		TO BE CONTACTED IF FURTH	ER INFORMATION IS NEEDED (Identify an inc nt.)	lividual to whom	
for Further Information	Name	Rachel Meyer		Telephone 952-844-2	655
	Address	3600 Minnesota Drive (Number, street, rural route, apartme Edina, MN 55435 (City, town, state, zip)			
	Email	rachel.meyer@m	nidco.com	Fax (optional	
	CERTIFICATIO	N (This statement of account mus	st be certified and signed in accordance with Co	ppyright Office regulations)	
O Certification		ned, hereby certify that (Check one ner other than corporation or par	e, <i>but only one</i> , of the boxes.) rtnership) I am the owner of the cable system as	identified in line 1 of space B; or	
		in line 1 of space B and that the	ion or partnership) I am the duly authorized agen owner is not a corporation or partnership; or		
	 I have examir are true, com 	in line 1 of space B.	a corporation) or a partner (if a partnership) of the ereby declare under penalty of law that all stateme knowledge, information, and belief, and are made	ents of fact contained herein	system
			X /s/ Rachel Meyer		
		Typed or printed r	name: Rachel Meyer		
			Director of Programming e of official position held in corporation or partnership)		
		Date:		2/13/2025	

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

counting Period: 2024/2	FORM SA1-2E. PAGE 8.
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
idcontinent Communications	4030
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below. \$ Name Name	P Special Statement Concerning Gross Receipts Exclusion
Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q 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 x 0.00274	
Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner Address	
ID number First community served Accounting period	

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