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.

**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

# 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 COVER	ED BY THIS STATEMENT:				
Accounting Period	2018/1					
<b>B</b> Owner	rate title of the subsidiary, not that of the List any other name or names under If there were different owners during a single statement of account and royalt	r which the owner conducts the busin of the accounting period, only the owner	ess of the cable system er on the last day of the counting perioo	m e accounting period should s		062911
	LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM				
	West Kentucky Rural Tele	ephone Coop.				
						120181
					062911	2018/1
	237 N 8th Street Mayfield, KY 42066					
С	INSTRUCTIONS: In line 1, give any					
System	names already appear in space B. In		i the system, il dille	ent nom the address give	in in space	D.
oystem						
	MAILING ADDRESS OF CABLE SYSTE	EM:				
	2 (Number, street, rural route, apartment, or suit	e number)				
	(City, town, state, zip code)					
D	Instructions: For complete space D	instructions, see page 1b. Identify	only the frst comm	unity served below and rel	ist on page	: 1b
Area Served	with all communities. CITY OR TOWN		STATE			
First	Kirksey		KY			
Community	Below is a sample for reporting cor	nmunities if you report multiple ch	annel line-ups in Sp	ace G.		
	CITY OR TOWN (SAMPLE)		STATE	CH LINE UP	SUB	GRP#
Sample	Alda		MD	Α		1
•	Alliance		MD	В		2
	Gering		MD	В		3
form in order to pro numbers. By provid search reports prep	Section 111 of title 17 of the United States Cores sess your statement of account. PII is any person ng PII, you are agreeing to the routine use of it ared for the public. The effect of not providing the statements of account, and it may affect the leg	onal information that can be used to identify to establish and maintain a public record, ne PII requested is that it may delay proces	y or trace an individual, su which includes appearing ssing of your statement of	uch as name, address and teleph in the Offce's public indexes and account and its placement in the	none d in	

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

08/28/2018

EGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
West Kentucky Rural Telephone Coop.			062911	
Instructions: List each separate community served by the cable system. A "commun n FCC rules: "a separate and distinct community or municipal entity (including uninco areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The of system identification hereafter known as the "first community." Please use it as the f	rporated communities the community the	ties within unincorp t you list will serve	oorated	D Area Served
Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho below the identified city or town.	ome parks should	be reported in pare	entheses	
f all communities receive the same complement of television broadcast stations (i.e., all communities with the channel line-up "A" in the appropriate column below or leave on a partially distant or partially permitted basis in the DSE Schedule, associate each designated by a number (based on your reporting from Part 9).	the column blank. relevant communi	If you report any s ty with a subscribe	tations r group,	
When reporting the carriage of television broadcast stations on a community-by-comm channel line-up designated by an alpha-letter(s) (based on your Space G reporting) a (based on your reporting from Part 9 of the DSE Schedule) in the appropriate column	nd a subscriber gr			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
Kirksey	KY	В	5	First
Beulah	KY	Α	1	Community
Brazil	KY	D	2	
Browns Grove	KY	А	3	
Buchanan	KY	С	6	
Churchton	KY	F	4	See instructions for
Clear Springs	KY	Α	3	additional information
Coldwater	KY	В	5	on alphabetization.
Cottage Grove	KY	С	6	
Cuba	KY	Α	3	
Cunningham	KY	Α	7	Add rows as necessa
Dexter	KY	В	5	Add Tows as necessa
Dogwood	KY	Α	3	
Dublin	KY	Α	3	
Eaton	KY	D	2	
Fairdealing	KY	Α	12	
Fancy Farm	KY	Α	3	
Farmington	KY	Α	3	
Faxon	KY	В	8	
Folsomdale	KY	A	3	
Hardin Hardin Alar	KY	<u>A</u>	12	
Harris Grove	KY	В	8	
Hazel	KY	В	13	
Hickory Kirbuton	KY KY	A	3	
Kirbyton	KY KY	A	3	
Lowes	KY KY	B	8	
Lynn Grove	KY KY	В	8	
Lynnville Mason Hall	KY	F	9	
Mason nan Melber	κγ κγ	A	10	
New Concord	κγ κγ		13	
Pryorsburg	KY	A	3	
Puryear	KY	C	6	
Sedalia	KY	A	3	
Trimble	KY	F	4	
Viola	KY	Α	3	
West Plains	KY	Α	3	
West Viola	KY	Α	3	
Wingo	KY	A	3	
Yorkville	KY	D	11	
				1

Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	<b>YSTE</b>	
	West Kentucky Rural Te	elephone C	oop.						06	5291
	SECONDARY TRANSMISSION	SERVICE: SI	IBSCRI	BERS AND RA	ATES					
E	In General: The information in s	pace E should	cover a	Il categories of	secondar					
	system, that is, the retransmission									
Secondary	about other services (including p						those exist	ng on the		
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						hle system	broken		
scribers and	down by categories of secondary									
Rates	each category by counting the n									
	separately for the particular serv									
	Rate: Give the standard rate c unit in which it is generally billed									
	category, but do not include disc				ny stanua		is within a p			
	Block 1: In the left-hand block	in space E, th	e form li	ists the categor	ries of sec	ondary transmi	ssion servio	e that cable		
	systems most commonly provide									
	that applies to your system. Note									
	categories, that person or entity subscriber who pays extra for ca									
	first set" and would be counted of									
	Block 2: If your cable system									
	printed in block 1 (for example, t									
	with the number of subscribers a sufficient.	and rates, in the	e right-h	and block. A tv	vo- or thre	e-word descrip	tion of the s	ervice is		
		DCK 1					BLOC	К 2		
		NO. OF					BLOO	NO. OF		
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RA	ATE
	Residential:									
	<ul> <li>Service to first set</li> </ul>			\$ 36.45	Expande	ed Service		2,943	\$	89.9
	<ul> <li>Service to additional set(s)</li> </ul>		5,069	\$ 4.95						
	• FM radio (if separate rate)									
	Motel, hotel									
	Commercial		12	\$ 46.20						
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s					
		te (not subscril	oor) info					ices that were		
E	In General: Space F calls for rat	•	,		•	• •				
F	not covered in space E, that is, t	hose services	that are	not offered in a	combinatio	on with any sec	ondary tran	smission		
F	not covered in space E, that is, t service for a single fee. There ar	hose services e two exceptio	that are	not offered in of do not need to	combination give rate	on with any sec information cor	ondary tran Icerning (1)	smission services		
F Services Other Than	not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services	hose services e two exceptio or facilities furr	that are ons: you nished to	not offered in a do not need to not need to not need to	combinatio give rate rs. Rate ir	on with any sec information cor nformation shou	ondary tran icerning (1) ild include t	smission services ooth the		
Other Than Secondary	not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the	hose services e two exception or facilities furn hit in which it is rate column.	that are ons: you nished to usually	not offered in o do not need to o nonsubscribe billed. If any ra	combination give rate rs. Rate in ates are ch	on with any sec information cor nformation shou narged on a var	ondary tran icerning (1) ild include t iable per-pr	smission services ooth the		
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Other Than Secondary Transmissions:	not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the <b>Block 1</b> : Give the standard rat <b>Block 2</b> : List any services that listed in block 1 and for which a brief (two- or three-word) descrip <u>CATEGORY OF SERVICE</u> Continuing Services: • Pay cable • Pay cable—add'I channel	hose services re two exceptio or facilities furn hit in which it is rate column. te charged by t tyour cable sy separate charge btion and inclue BLO	that are ins: you hished to usually the cable stem fur ge was n de the ra <u>CK 1</u> <u>CATEC</u> Installa • Cor • Pay	not offered in o do not need to o nonsubscribe billed. If any ra e system for ea nished or offer- nade or establi- ate for each. <u>CORY OF SER</u> <b>ation: Non-res</b> tel, hotel mmercial	combination give rate irs. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	on with any sec information cor nformation shounarged on a var applicable serv the accounting these other ser	ondary tran acerning (1) Ild include t iable per-pr ces listed. period that vices in the CATEGC Variety T	smission services ooth the ogram basis, were not form of a <u>BLOCK 2</u> ORY OF SERVICE	\$ \$	6.9
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Other Than Secondary Transmissions:	not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the <b>Block 1</b> : Give the standard rat <b>Block 2</b> : List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE <b>Continuing Services:</b> • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection <b>Installation: Residential</b>	hose services re two exceptio or facilities furn hit in which it is rate column. te charged by t tyour cable sy separate charge btion and inclue BLO	that are ns: you nished to usually the cable stem fur ge was n de the ra CK 1 CATEC Installa • Mot • Cor • Pay • Pay • Fire • Bur	not offered in o do not need to p nonsubscribe billed. If any ra e system for ea nished or offer- nade or establi- ate for each. CORY OF SER ation: Non-res tel, hotel mmercial / cable / cable- add'l ch	combination give rate irs. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	on with any sec information cor nformation shounarged on a var applicable serv the accounting these other ser	ondary tran acerning (1) Ild include t iable per-pr ces listed. period that vices in the CATEGC Variety T HD Tier Hispanic HBO Showtim	smission services ooth the ogram basis, were not form of a BLOCK 2 ORY OF SERVICE Tier	\$ \$ \$ \$	6.9 14.9 12.9 15.9 15.9
Other Than Secondary Transmissions:	not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the <b>Block 1</b> : Give the standard rat <b>Block 2</b> : List any services that listed in block 1 and for which a brief (two- or three-word) descrip <u>CATEGORY OF SERVICE</u> <u>Continuing Services:</u> • Pay cable • Pay cable • Fire protection • Burglar protection <b>Installation: Residential</b> • First set	hose services re two exceptio or facilities furn hit in which it is rate column. te charged by t tyour cable sy separate charge btion and inclue BLO	that are ns: you nished to usually the cable stem fur ge was n de the ra CK 1 CATEC Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s	not offered in o do not need to o nonsubscribe billed. If any ra e system for ea nished or offer- nade or establi- ate for each. GORY OF SER ation: Non-res tel, hotel mmercial / cable / cable-add'l ch e protection glar protection	combination give rate irs. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	on with any sec information cor nformation shounarged on a var applicable serv the accounting these other ser	ondary tran acerning (1) Ild include t iable per-pr ces listed. period that vices in the CATEGC Variety T HD Tier Hispanic HBO Showtim	smission services ooth the ogram basis, were not form of a BLOCK 2 ORY OF SERVICE Tier	\$ \$ \$ \$	6.9 14.9 12.9 15.9 15.9
Other Than Secondary Transmissions:	not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the <b>Block 1</b> : Give the standard rat <b>Block 2</b> : List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE <b>Continuing Services:</b> • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection <b>Installation: Residential</b> • First set • Additional set(s)	hose services re two exceptio or facilities furn hit in which it is rate column. te charged by t tyour cable sy separate charge btion and inclue BLO	that are ns: you nished to usually the cable stem fur ge was n de the ra CK 1 CATEC Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s • Rec	not offered in o do not need to o nonsubscribe billed. If any ra e system for ea nished or offer- nade or establi- ate for each. BORY OF SER ation: Non-res tel, hotel mmercial / cable / cable-add'l ch e protection glar protection services:	combination give rate irs. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	on with any sec information cor nformation shounarged on a var applicable serv the accounting these other ser	ondary tran acerning (1) Ild include t iable per-pr ces listed. period that vices in the CATEGC Variety T HD Tier Hispanic HBO Showtim	smission services ooth the ogram basis, were not form of a BLOCK 2 ORY OF SERVICE Tier	\$ \$ \$ \$	6.9 14.9 12.9 15.9 15.9
Other Than Secondary Transmissions:	not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the <b>Block 1</b> : Give the standard rat <b>Block 2</b> : List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	hose services re two exceptio or facilities furn hit in which it is rate column. te charged by t tyour cable sy separate charge btion and inclue BLO	that are ns: you hished to usually the cable stem fur ye was n de the ra CK 1 CATEC Installa • Mot • Cor • Pay • Fire • Bur Other s • Rec • Disc	not offered in o do not need to o nonsubscribe billed. If any ra e system for ea nished or offer- nade or establi- ate for each. BORY OF SER ation: Non-res tel, hotel mmercial / cable / cable-add'l ch e protection glar protection services: connect	combination give rate irs. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	on with any sec information cor nformation shounarged on a var applicable serv the accounting these other ser	ondary tran acerning (1) Ild include t iable per-pr ces listed. period that vices in the CATEGC Variety T HD Tier Hispanic HBO Showtim	smission services ooth the ogram basis, were not form of a BLOCK 2 ORY OF SERVICE Tier	\$ \$ \$ \$	6.9 14.9 12.9 15.9 15.9

LEGAL NAME OF C	WNER OF CABLE S	YSTEM:			SYSTEM ID#	Name
West Kentuc	ky Rural Tele	phone Coc	op.		062911	Nulle
RIMARY TRANSMI	TTERS: TELEVISIO	N				
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s community of lice n which your cable <b>Column 3:</b> Indic ducational station, for independent mu for the meaning of <b>Column 4:</b> If the lanation of local se <b>Column 5:</b> If you able system carrie	ense. For example e system carried th ate in each case of by entering the le ulticast), "E" (for n these terms, see e station is outside ervice area, see p u have entered "Y	e, WRC is Ch ne station. whether the s etter "N" (for n oncommercia page (v) of th the local ser age (v) of the es" in column	annel 4 in Wash tation is a netwo network), "N-M" ( al educational), o re general instruc- vice area, (i.e. "o general instruct 4, you must con accounting perio	aington, D.C. This ork station, an indu- for network multion or "E-M" (for nonce- ctions located in the distant"), enter "Ye- ions located in the mplete column 5, od. Indicate by en-	tion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial cast), "I" (for independent), "I-M" ommercial educational multicast). he paper SA3 form. es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	
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ORM SA3E. PAGE 3.	
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LEGAL NAME OF OW	NER OF CABLE S	YSTEM:			SYSTEM ID#	Nomo
West Kentuck	y Rural Tele	phone Coc	р		062911	Name
PRIMARY TRANSMITT	ERS: TELEVISIO	NC				
carried by your cable	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under	G
Ũ			· · ·	Ũ	ain network programs [sections and (2) certain stations carried on a	Primary
substitute program ba			•	r(e)(2) and (4))],	and (2) certain stations carried on a	Transmitters:
			•	s carried by your	cable system on a substitute program	Television
<ul> <li>basis under specifc F</li> <li>Do not list the statio station was carried</li> </ul>	n here in space	G-but do lis		e Special Statem	ent and Program Log)—if the	
List the station here	, and also in spa nformation cond	ace I, if the sta			tute basis and also on some other of the general instructions located	
Column 1: List ea	ch station's call	•			es such as HBO, ESPN, etc. Identify	
			•	0	ition. For example, report multi- h stream separately; for example	
WETA-simulcast).			·	· ·		
			•		ion for broadcasting over-the-air in may be different from the channel	
on which your cable s	ystem carried tl	he station.		0	,	
					ependent station, or a noncommercial cast), "I" (for independent), "I-M"	
(for independent mult	icast), "E" (for n	oncommercia	I educational), c	or "E-M" (for nonc	ommercial educational multicast).	
For the meaning of th Column 4: If the s					he paper SA3 form. es". If not, enter "No". For an ex-	
planation of local serv	/ice area, see p	age (v) of the	general instruct	ions located in th	e paper SA3 form.	
					stating the basis on which your tering "LAC" if your cable system	
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the cable system and tion "E" (exempt). For	a primary trans simulcasts, als	mitter or an a o enter "E". If	ssociation repre you carried the	esenting the prima channel on any o	ry transmitter, enter the designa- ther basis, enter "O." For a further	
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LEGAL NAME OF OW	NER OF CABLE SY	YSTEM:			SYSTEM ID#	
West Kentucky	y Rural Tele	phone Coc	p.		062911	Name
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba Substitute program ba Substitute Basis basis under specifc Fi • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List ear each multicast stream cast stream as "WETA- Simulcast). Column 2: Give th its community of licen on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of th Column 4: If the s planation of local serv Column 5: If you f carried the distant sta For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these t Column 6: Give th	G, identify even system during system during consist as explained <b>Stations:</b> With 1 CC rules, regula n here in space lonly on a subs and also in spa nformation concorrect orm. ch station's call a associated with A-2". Simulcast the channel numl se. For example ystem carried th e in each case w y entering the le icast), "E" (for n ese terms, see tation is outside rice area, see pa have entered "Y" the distant static tion on a part-tin sion of a distant t entered into o a primary trans simulcasts, also	y television st he accounting n June 24, 19 4), or 76.63 (i cd in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta cerning substi sign. Do not th h a station ac streams must ber the FCC h e, WRC is Ch ne station. whether the si etter "N" (for n oncommercia page (v) of the the local sen age (v) of the eme basis beca c multicast stre n or before Ju mitter or an a o enter "E". If , see page (v)	g period, except 81, permitting th referring to 76.6 paragraph. / distant stations iorizations: t it in space I (th ation was carried tute basis station report origination cording to its over be reported in or as assigned to annel 4 in Wash tation is a netwo etwork), "N-M" ( I educational), or e general instruct 4, you must cor accounting period ause of lack of a esam that is not s ine 30, 2009, be ssociation repre you carried the of the general in r U.S. stations,	(1) stations carrie the carriage of cert 1(e)(2) and (4))]; a s carried by your of the Special Statem d both on a substi- ns, see page (v) of the program service er-the-air designal column 1 (list eac the television stat sington, D.C. This with station, an inder for network multion or "E-M" (for nonco- ctions located in the mplete column 5, pol. Indicate by en inctivated channel subject to a royalty senting the prima channel on any o instructions located list the community	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitter Television
Note: If you are utilizi						
		CHANN	EL LINE-UP	C		
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	
WKRN-DT	27	N-M			Nashville, TN	
WKRN-HD	27.1	N			Nashville, TN	
WNAB-DT	23	I			Nashville, TN	
WNPT-DT	8	Е	Yes	0	Nashville, TN	
WPSD-DT	32	N-M			Paducah, KY	
WPSD-HD	32.1	N			Paducah, KY	
WSMV-DT	10	N-M			Nashville, TN	
WSMV-HD	10.1	N			Nashville, TN	]
WTVF-DT	25	N-M			Nashville, TN	
WTVF-HD	25.1	N			Nashville, TN	
WUPX-DT	21	I	Yes	0	Morehead, KY	1
WZTV-DT	15	I-M			Nashville, TN	
W/7T\/_HD	15 1	l .				]

Nashville, TN

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WZTV-HD

15.1

L

LEGAL NAME OF C	WNER OF CABLE SY	YSTEM:			SYSTEM ID#	
West Kentuc	ky Rural Tele	phone Coo	р.		062911	Name
PRIMARY TRANSMI	ITTERS: TELEVISIO	ON				
•					s and low power television stations)	G
		-			ed only on a part-time basis under ain network programs [sections	Ŭ
					and (2) certain stations carried on a	Primary
substitute program	basis, as explaine	d in the next	baragraph.		cable system on a substitute program	Transmitter Televisior
basis under specifo	FCC rules, regula	ations, or auth	orizations:			
	tion here in space ied only on a subs		t it in space I (th	e Special Statem	ent and Program Log)—if the	
<ul> <li>List the station he</li> </ul>	re, and also in spa	ace I, if the sta	tion was carried	d both on a substi	tute basis and also on some other	
		erning substit	ute basis station	ns, see page (v) o	of the general instructions located	
in the paper SA		aign Do not r	oport origination	n no grom oon iloo	a such as HRO, ESRN, ata, Idantify	
		-			s such as HBO, ESPN, etc. Identify tion. For example, report multi-	
			•	•	h stream separately; for example	
,	the channel num	ber the FCC h	as assigned to	the television stat	ion for broadcasting over-the-air in	
			•		may be different from the channel	
on which your cable				-		
				,	ependent station, or a noncommercial	
					cast), "I" (for independent), "I-M"	
· ·	<i>//</i>			· ·	ommercial educational multicast). he paper SA3 form.	
					es". If not, enter "No". For an ex-	
planation of local se			-			
•		• • •	•		stating the basis on which your	
					tering "LAC" if your cable system	
carried the distant	•					
					payment because it is the subject	
-				•	stem or an association representing	
					ry transmitter, enter the designa- ther basis, enter "O." For a further	
· · /					ed in the paper SA3 form.	
					y to which the station is licensed by the	
FCC. For Mexican	or Canadian statio	ons, if any, giv	e the name of th	ne community with	h which the station is identifed.	
Note: If you are util	lizing multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
	_	CHANN	EL LINE-UP	D		
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)		
WBBJ-DT	43	N			Jackson, TN	
	39				Jackson, TN	
WLJT	47	E			Lexington, TN	
WREG	28	N	Vaa	~	Memphis, TN	
WSMV-DT	10	N-M	Yes	0	Nashville, TN	
WSMV-HD	10.1	N	Yes	E	Nashville, TN	
WTVF-DT	25	N-M	Yes	0	Nashville, TN	
		1				

ORM SA3E. PAGE 3.	
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LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#	Name
West Kentuck	y Rural Telep	phone Coo	op.		062911	Hamo
PRIMARY TRANSMITT	ERS: TELEVISIO	DN				
					s and low power television stations) ed only on a part-time basis under	G
FCC rules and regula	tions in effect or	n June 24, 19	81, permitting th	ne carriage of cert	tain network programs [sections	-
76.59(d)(2) and (4), 7 substitute program ba			•	1(e)(2) and (4))];	and (2) certain stations carried on a	Primary Transmitters:
1 0	· ·			s carried by your	cable system on a substitute program	Television
<ul> <li>basis under specifc F</li> <li>Do not list the station</li> </ul>				ne Special Statem	ent and Program Log)—if the	
station was carried	l only on a subst	titute basis.	· 、		с с,	
	•				itute basis and also on some other of the general instructions located	
in the paper SA3 for	orm.	Ū			C .	
		•			es such as HBO, ESPN, etc. Identify ation. For example, report multi-	
cast stream as "WET			•	•	h stream separately; for example	
WETA-simulcast). Column 2: Give th	ne channel numb	per the FCC h	nas assigned to	the television stat	tion for broadcasting over-the-air in	
ts community of licen	ise. For example	e, WRC is Ch	Ũ		may be different from the channel	
on which your cable s Column 3: Indicat			tation is a netwo	ork station, an ind	ependent station, or a noncommercial	
					cast), "I" (for independent), "I-M"	
for independent mult For the meaning of th					ommercial educational multicast). he paper SA3 form.	
Column 4: If the s	tation is outside	the local serv	vice area, (i.e. "o	distant"), enter "Y	es". If not, enter "No". For an ex-	
blanation of local serv Column 5: If you h					e paper SA3 form. stating the basis on which your	
cable system carried	the distant static	on during the	accounting perio	od. Indicate by en	tering "LAC" if your cable system	
carried the distant sta	•				capacity.	
For the retransmis	sion of a distant	multicast stre	eam that is not s	subject to a royalt	y payment because it is the subject	
of a written agreemen	nt entered into or	n or before Ju	une 30, 2009, be	etween a cable sy	stem or an association representing	
of a written agreemen the cable system and	nt entered into or a primary transi	n or before Ju mitter or an a	une 30, 2009, be ssociation repre	etween a cable sy esenting the prima		
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t	nt entered into or a primary transi simulcasts, also hree categories,	n or before Ju mitter or an a o enter "E". If , see page (v)	une 30, 2009, be ssociation repre you carried the ) of the general	etween a cable sy esenting the prima channel on any o instructions locate	stem or an association representing ary transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form.	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th	at entered into or a primary transi simulcasts, also hree categories, ae location of eac	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations,	etween a cable sy esenting the prima channel on any o instructions locate list the communit	stem or an association representing ary transmitter, enter the designa- ther basis, enter "O." For a further	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th FCC. For Mexican or	at entered into or a primary transi simulcasts, also hree categories, ne location of ea Canadian statio	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv	une 30, 2009, be ssociation repre- you carried the ) of the general or U.S. stations, re the name of th	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community wit	stem or an association representing ary 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 h which the station is identifed.	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th FCC. For Mexican or	at entered into or a primary transi simulcasts, also hree categories, ne location of ea Canadian statio	n or before Ju mitter or an a penter "E". If , see page (v ch station. Fo ns, if any, giv nnel line-ups,	une 30, 2009, be ssociation repre- you carried the ) of the general or U.S. stations, re the name of th	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community wit space G for each	stem or an association representing ary 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 h which the station is identifed.	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th	at entered into or a primary transi simulcasts, also hree categories, ne location of ea Canadian statio	n or before Ju mitter or an a penter "E". If , see page (v ch station. Fo ns, if any, giv nnel line-ups,	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, the 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 wit space G for each	stem or an association representing ary 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 h which the station is identifed.	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utilizi	at entered into or a primary transu simulcasts, also three categories, he location of ear Canadian statio ng multiple char	n or before Ju mitter or an a p enter "E". If , see page (v ch station. Fo ns, if any, giv nnel line-ups, CHANN	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, re the name of th use a separate	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community wit space G for each	stem or an association representing ary transmitter, enter the designa- other basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the h which the station is identifed. In channel line-up.	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utilizi	a primary transi simulcasts, also hree categories, location of ear Canadian statio ng multiple char 2. B'CAST CHANNEL NUMBER	n or before Ju mitter or an a p enter "E". If , see page (v ch station. Fo ns, if any, giv anel line-ups, <b>CHANN</b> 3. TYPE	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, re the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community wit space G for each <b>E</b> 5. BASIS OF	stem or an association representing ary 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 h which the station is identifed. a channel line-up. 6. LOCATION OF STATION	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utilizi 1. CALL SIGN <b>KBSI-HD</b>	a primary transi simulcasts, also hree categories, le location of ear Canadian statio ng multiple char 2. B'CAST CHANNEL NUMBER 22.1	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv anel line-ups, <b>CHANN</b> 3. TYPE OF STATION I	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, re the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community wit space G for each <b>E</b> 5. BASIS OF CARRIAGE	stem or an association representing ary 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 h which the station is identifed. In channel line-up. 6. LOCATION OF STATION <b>Cape Girardeau. MO</b>	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utilizi 1. CALL SIGN <b>KBSI-HD</b> <b>KBSI-HD</b>	a primary transi simulcasts, also hree categories, location of ear Canadian statio ng multiple char 2. B'CAST CHANNEL NUMBER 22.1 22	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, re the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community wit space G for each <b>E</b> 5. BASIS OF CARRIAGE	<ul> <li>stem or an association representing ary 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 h which the station is identifed.</li> <li>a channel line-up.</li> <li>6. LOCATION OF STATION</li> <li>Cape Girardeau. MO</li> <li>Cape Girardeau. MO</li> </ul>	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utilizi 1. CALL SIGN <b>KBSI-HD</b> <b>KBSI-HD</b>	a primary transi simulcasts, also hree categories, le location of ear Canadian statio ng multiple char 2. B'CAST CHANNEL NUMBER 22.1	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv anel line-ups, <b>CHANN</b> 3. TYPE OF STATION I	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, re the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community wit space G for each <b>E</b> 5. BASIS OF CARRIAGE	stem or an association representing ary 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 h which the station is identifed. In channel line-up. 6. LOCATION OF STATION <b>Cape Girardeau. MO</b>	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utilizi 1. CALL SIGN <b>KBSI-HD</b> <b>KBSI-HD</b> <b>KBSI-DT</b> <b>KFVS-DT</b>	a primary transi simulcasts, also hree categories, location of ear Canadian statio ng multiple char 2. B'CAST CHANNEL NUMBER 22.1 22	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION I I-M	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, re the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community wit space G for each <b>E</b> 5. BASIS OF CARRIAGE	<ul> <li>stem or an association representing ary 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 h which the station is identifed.</li> <li>a channel line-up.</li> <li>6. LOCATION OF STATION</li> <li>Cape Girardeau. MO</li> <li>Cape Girardeau. MO</li> </ul>	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utilizi 1. CALL SIGN <b>KBSI-HD</b> <b>KBSI-HD</b> <b>KBSI-DT</b> <b>KFVS-HD</b>	a primary transi simulcasts, also hree categories, e location of ear Canadian statio ng multiple char 2. B'CAST CHANNEL NUMBER 22.1 22 12	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION I I-M N-M	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, re the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community wit space G for each <b>E</b> 5. BASIS OF CARRIAGE	<ul> <li>stem or an association representing ary transmitter, enter the designa- other basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the h which the station is identifed.</li> <li>a channel line-up.</li> <li>6. LOCATION OF STATION</li> <li>Cape Girardeau. MO</li> <li>Cape Girardeau. MO</li> <li>Cape Girardeau. MO</li> <li>Cape Girardeau. MO</li> </ul>	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utilizi 1. CALL SIGN <b>KBSI-HD</b> <b>KBSI-HD</b> <b>KBSI-DT</b> <b>KFVS-DT</b> <b>KFVS-HD</b> <b>WBBJ-HD</b>	a primary transi simulcasts, also hree categories, location of ear Canadian statio ng multiple char 2. B'CAST CHANNEL NUMBER 22.1 22 12 12.1	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION I I-M N-M N	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, re the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community wit space G for each <b>E</b> 5. BASIS OF CARRIAGE	<ul> <li>istem or an association representing ary 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 h which the station is identifed.</li> <li>6. LOCATION OF STATION</li> <li>6. LOCATION OF STATION</li> <li>Cape Girardeau. MO</li> </ul>	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these t <b>Column 6:</b> Give th FCC. For Mexican or <b>Note:</b> If you are utilizi 1. CALL SIGN <b>KBSI-HD</b>	a primary transi simulcasts, also hree categories, e location of ear Canadian statio ng multiple char 2. B'CAST CHANNEL NUMBER 22.1 22 12 12 12.1 43.1	n or before Ju mitter or an a p enter "E". If , see page (v) ch station. Fo ns, if any, giv anel line-ups, <b>CHANN</b> 3. TYPE OF STATION I I-M N-M N	une 30, 2009, be ssociation repre you carried the ) of the general or U.S. stations, re the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable sy esenting the prima channel on any o instructions locate list the communit he community wit space G for each <b>E</b> 5. BASIS OF CARRIAGE	<ul> <li>stem or an association representing ary 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 h which the station is identifed.</li> <li>a channel line-up.</li> <li>6. LOCATION OF STATION</li> <li>Cape Girardeau. MO</li> <li>Cape Girardeau. MO</li> <li>Cape Girardeau. MO</li> <li>Cape Girardeau. MO</li> <li>Jackson, TN</li> </ul>	
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West Kentuck					SYSTEM ID#	Name
	vy Rural Telep	ohone Coo	p.		062911	Name
n General: In space	TERS: TELEVISIC	DN .				
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba <b>Substitute Basis</b> basis under specifc F • Do not list the station station was carried • List the station here basis. For further in the paper SA3 f <b>Column 1:</b> List ea each multicast stream cast stream as "WET WETA-simulcast). <b>Column 2:</b> Give th its community of licer on which your cable s <b>Column 3:</b> Indicat educational station, b (for independent multi For the meaning of th <b>Column 4:</b> If the s	e system during the ations in effect or 76.61(e)(2) and (- vasis, as explaine <b>5 Stations:</b> With r FCC rules, regula on here in space and also in space of only on a subste- e, and also in space information conc form. ach station's call m associated with FA-2". Simulcast st the channel numb nse. For example system carried the te in each case v by entering the le liticast), "E" (for no hese terms, see p station is outside	ne accounting n June 24, 198 4), or 76.63 (r d in the next p respect to any titons, or auth G—but do list titute basis. Ice I, if the sta erning substit sign. Do not r n a station acc streams must ber the FCC h e, WRC is Cha te station. whether the station. whether the station concommercial bage (v) of the the local serv age (v) of the	period, except 81, permitting th referring to 76.6 paragraph. v distant stations orizations: t it in space I (th ation was carried use basis station report origination cording to its ov- be reported in or annel 4 in Wash ation is a netwo etwork), "N-M" ( I educational), o e general instruct	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a s carried by your of e Special Stateme d both on a substitution in program service er-the-air designa column 1 (list each the television stati ington, D.C. This ink station, an inder for network multic r "E-M" (for nonco ctions located in the ions located in the	es". If not, enter "No". For an ex- e paper SA3 form.	G Primary Transmitters Television
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Column 5: If you l cable system carried carried the distant sta For the retransmis of a written agreemen the cable system and explanation of these i Column 6: Give tt FCC. For Mexican or Note: If you are utiliz	I the distant static ation on a part-tir ssion of a distant ent entered into or d a primary transfor or simulcasts, also three categories, the location of ear r Canadian statio zing multiple char 2. B'CAST CHANNEL NUMBER 12 43 43.1 39 47	on during the a me basis beca multicast stree n or before Ju mitter or an as o enter "E". If i , see page (v) ch station. Fo ns, if any, give anel line-ups, <b>CHANN</b> 3. TYPE OF STATION <b>N-M</b> N N I E	accounting period ause of lack of a earn that is not s ine 30, 2009, be ssociation repre you carried the of the general i r U.S. stations, e the name of th use a separate <b>EL LINE-UP</b> 4. DISTANT?	d. Indicate by end ctivated channel of ubject to a royalty tween a cable system channel on any of instructions locate list the community with space G for each <b>F</b> 5. BASIS OF CARRIAGE	ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing ry transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION Cape Girardeau. MO Jackson, TN Jackson, TN Lexington, TN	

Name	LEGAL NAME OF C								SYSTEM ID# 062911
H Primary Transmitters: Radio	all-band basis v Special Instruct receivable if (1) on the basis of For detailed info located in the p Column 1: lo Column 2: S	t every radio s whose signals ctions Concer it is carried by monitoring, to prmation abou aper SA3 form dentify the call State whether t	tation ca were "ge <b>ming All</b> / the sys be receir t the the n. sign of e he statio	rried on a separate and discr nerally receivable" by your ca <b>-Band FM Carriage:</b> Under tem whenever it is received a ved at the headend, with the Copyright Office regulations each station carried. n is AM or FM.	abi Cc at t sy on	le system during opyright Office re he system's hea stem's FM anter h this point, see	g the accountin egulations, an adend, and (2) nna, during ce page (vi) of the	ng period FM sign it can b rtain sta e genera	d. nal is generally e expected, ted intervals. al instructions
	signal, indicate Column 4: G	this by placing Give the station	a check i's locatio	nal was electronically process mark in the "S/D" column. on (the community to which the the community with which the	ne	station is licens	ed by the FCC		
		ANA or ENA	S/D		П		AM or EM	S/D	
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	╞	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
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LEGAL NAME OF OWNER OF	CABLE SYST	TEM:				SYSTEM ID#	
West Kentucky Rural	Telephone	е Соор.				062911	Name
SUBSTITUTE CARRIAGE	: SPECIA		NT AND PROGRAM LOG				
In General: In space I, identi substitute basis during the ad							-
explanation of the programm							Substitute
1. SPECIAL STATEMENT	-						Carriage: Special
<ul> <li>During the accounting per broadcast by a distant stat</li> </ul>		ir cable system	n carry, on a substitute basi	s, any nonne			Statement and
Note: If your answer is "No		rest of this page	ne blank. If vour answer is "	Yes." vou mu	Ist complete the prog		Program Log
log in block 2.	,			, jeae			
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call s Column 4: Give the broat the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progra ce, please a of every no distant stat gulations, o tion. Do no .ucy" or "NE n was broad sign of the s adcast static th and day ve "5/7." es when the Example: a er "R" if the and regulatic ogramming	am on a separa attach addition nnetwork telev ion and that your or authorization it use general of A Basketball: dcast live, enter station broadca on's location (th ons, if any, the when your syster a program carri- listed program ons in effect du	al pages. ision program (substitute p our cable system substituted s. See page (vi) of the gene categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "N asting the substitute program the community to which the community with which the s tem carried the substitute p ogram was carried by your of ed by a system from 6:01:1 was substituted for progra uring the accounting period	rogram) that, d for the prog eral instructio "basketball". o." m. station is lice station is ider program. Use cable system. 5 p.m. to 6:2 mming that y c enter the let	during the accounting ramming of another s ins located in the pap List specific program nsed by the FCC or, i ntified). numerals, with the m List the times accura 8:30 p.m. should be our system was requi ter "P" if the listed pro	g station er n in nonth ately	
s	UBSTITUT	E PROGRAM	1		EN SUBSTITUTE IAGE OCCURRED	7. REASON	
1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	FOR DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO	5	
					_		
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FORM SA3E. PAGE 5.

Accounting	ERIOD: 2018/1							101	RIVI SAJE. PAGE 0.
	LEGAL NAME OF	OWNER OF CABLE	SYSTEM:						SYSTEM ID#
Name	West Kentu	cky Rural Te	lephone Coop.						062911
J Part-Time Carriage Log	time carriage du hours your syst Column 1 (C column 5 of spa Column 2 (E curred during th • Give the mont "4/10." • State the start television statio "app." Example	is space ties in ue to lack of act em carried that <b>call sign):</b> Give ace G. <b>Dates and hour</b> he accounting p th and day when ting and ending m's broadcast d : "12:30 a.m.– 3	with column 5 of sp ivated channel cap station. If you need the call sign of eve <b>s of carriage):</b> For eriod. In the carriage occur times of carriage to lay, you may give al	acity, you are re more space, pl ry distant statior each station, lis red. Use numer the nearest qua n approximate e	quir ease wh t the als, arter ndir	ed to complete t e attach addition ose basis of car e dates and hour with the month f hour. In any cas ing hour, followed	his log giving th al pages. riage you identi rs when part-tim first. Example: fo se where carria I by the abbrevia	e total dates and fied by "LAC" in the carriage oc- or April 10 give ge ran to the end ation	of the
			DATES	AND HOURS (	DF F	PART-TIME CAF	RIAGE		
		WHEN	I CARRIAGE OCCL	JRRED			WHEN	I CARRIAGE OC	CURRED
	CALL SIGN		HOUF			CALL SIGN			URS
	-	DATE	FROM	TO			DATE	FROM	ТО
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FORM	SA3E. PAGE 7.			
	AL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name
We	st Kentucky Rural Telephone Coop.		062911	Name
Inst all a (as page	<b>DSS RECEIPTS ructions</b> : 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 section of the space E) during the accounting period. For a further explanation of how to ce (vii) of the general instructions.         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.	compute this am	sion service	K Gross Receipts
<ul> <li>Instru</li> <li>Con</li> <li>Con</li> <li>If you feet</li> <li>If you according to the second seco</li></ul>	<b>(RIGHT ROYALTY FEE</b> <b>ctions:</b> 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. For system did not carry any distant television stations, leave block 3 blank. Enter the air from block 1 on line 1 of block 4, and calculate the total royalty fee. For system did carry any distant television stations, you must complete the applicable p pompanying this form and attach the schedule to your statement of account.	arts of the DSE	Schedule	L 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.		eroi	
	It 6 of the DSE schedule was completed, the amount from line 7 of block C should be slow.	entered on line	2 in block	
▶ If pa	now. Int 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be entered	on line	
	<b>MINIMUM FEE:</b> 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 fe system's gross receipts for the accounting period.		ent 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.	\$	742,267.80	
	This is your minimum fee.	\$	7,897.73	
2 Block	<ul> <li>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 colur "Yes" in this block.</li> <li>Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule.</li> <li>No—Leave block 3 below blank and c</li> <li>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</li> </ul>	nn 4, you must od?	check	
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE		417.53	
	schedule. If none, enter zero			
	Line 3. Add lines 1 and 2 and enter here	\$	1,121.59	
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	\$	7,897.73	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, ente 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	\$	8,622.73	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	

ACCOUNTING PERIOD:	2018/1
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ACCOUNTING PERI	00. 2018/1			FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER			SYSTEM ID#
Name	West Kentucky R	ural Tel	ephone Coop.	062911
	CHANNELS			
М		nust aive	(1) the number of channels on which the cable system carried television broadc	ast stations
		-	cable system's total number of activated channels, during the accounting period	
Channels			cable system's total number of activated channels, during the accounting period	
	1. Enter the total nu	mber of	hannels on which the cable	
	system carried tel	evision b	oadcast stations	28
	2. Enter the total nu	mber of	activated channels	
	on which the cable	e system	carried television broadcast stations	280
	and nonbroadcast	services		
Ν	INDIVIDUAL TO BE		CTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual	
			tement of account.)	
Individual to				
Be Contacted				
for Further	Name Patti T	aylor	Telephor	1e
Information				
	Address 237 N	8th Str	eet	
	(Number, s	treet, rural	cet. oute, apartment, or suite number)	
	Mayfie	ld. KY	42066	
	(City, town,		-2000	
	Email		Fax (optional)	
	CERTIFICATION (Th	is staten	ent of account must be certifed and signed in accordance with Copyright Office	regulations
0		no staten	ent of account must be certied and signed in accordance with copyright office	
0				
Certifcation	• I, the undersigned,	hereby ce	tify that (Check one, <i>but only one</i> , of the boxes.)	
	(Owner other the	n corno	ation or partnership) I am the owner of the cable system as identifed in line 1 of sp	ace B: or
			autor of partnership, rain the owner of the cable system as identified in line r of sp	
	<u> </u>			
			n corporation or partnership) I am the duly authorized agent of the owner of the c that the owner is not a corporation or partnership; or	able system as identified
	·	-	n officer (if a corporation) or a partner (if a partnership) of the legal entity identifed a	s owner of the cable system
	in line 1 of sp	ace B.		
	I have examined the	e stateme	nt of account and hereby declare under penalty of law that all statements of fact con	ained herein
			to the best of my knowledge, information, and belief, and are made in good faith.	
	[18 U.S.C., Section 1	001(198	)]	
		_		
		Х	/s/Tiffany Myers	
			a electronic signature on the line above using an "/s/" signature to certify this statement. John Smith). Before entering the first forward slash of the /s/ signature, place your cur	por in the box and proce the
			ton, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's L	
		Typed	or printed name: Tiffany Myers	
			Chief Financial Office	
		Title:	Chief Financial Officer	
			(Title of official position held in corporation or partnership)	
		_		
		Date:	August 28, 2018	
	l			
Privacy Act Notice			ted States Code authorizes the Copyright Offce to collect the personally identifying info	

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in th completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law

FORM	SA3E	PAGE9
	JAJL.	I AULS

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
West Kentucky Rural Telephone Coop.	062911	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUS		
The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of th lowing sentence: "In determining the total number of subscribers and the gross amounts paid to service of providing secondary transmissions of primary broadcast transmitte scribers and amounts collected from subscribers receiving secondary transm	e Copyright Act by adding the fol- o the cable system for the basic rs, the system shall not include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) paper SA3 form.	of the general instructions in the	Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross red made by satellite carriers to satellite dish owners?	ceipts for secondary transmissions	
XNO		
YES. Enter the total here and list the satellite carrier(s) below.	. \$	
Name Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of For an explanation of interest assessment, see page (viii) of the general instructions		Q
Line 1 Enter the amount of late payment or underpayment		Interest
	·	Assessment
	x	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	······ <u> </u>	
	xdays	
Line 3 Multiply line 2 by the number of days late and enter the sum here	× 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,		
space L, (page 7)	\$	
	(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	e.pdf. For further assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for or	ne day late.	
NOTE: If you are filing this worksheet covering a statement of account already subm please list below the owner, address, first community served, accounting period, and filing.		
Owner		
Address		
First community convol		
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 or	ו th

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the 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.

#### INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

#### FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

**Step 2:** Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space 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 sover the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

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

#### TOTAL OF DSEs

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

#### THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee anc 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  $\varepsilon$  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 sys-

tems 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, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

#### DSE SCHEDULE. PAGE 11.

#### COMPUTING THE BASE RATE FEE-PART 8 OF THE DSE SCHEDULE

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

· If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable. First DSF 1.064% of gross receipts

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE

## 0.330% of gross receipts PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

If any of the stations were partially distant:

1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.

2. Identify the communities/areas represented by each subscriber group. 3. For each subscriber group, calculate the total number of DSEs of

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

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

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

TOTAL DSEs

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

CITY

Santa Rosa

Rapid City

Fairvale

Bodega Bay

DSE

1.0

1.0

0.083

0.139

0.25

2.472

Distant Stations Carried STATION In most cases under current FCC rules, all of Fairvale would be within A (independent) B (independent) the local service area of both stations C (part-time) A and C and all of Rapid City and Bo-D (part-time) dega Bay would be within the local E (network) service areas of stations B, D, and E.



Minimum Fee Total Gross Receipts		\$600,000.00			
		x .01064			
		\$6,384.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

Identification of Subscriber Groups

OUTSIDE LOCAL

Stations A and C

Stations A and C

Stations B. D. and E

TOTAL GROSS RECEIPTS

SERVICE AREA OF

Stations A, B, C, D ,E

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

GROSS RECEIPTS

\$310,000.00

100,000.00

70,000.00

120,000.00

\$600,000.00

FROM SUBSCRIBERS

## DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	YSTEM ID
1	West Kentucky Rural T	elephone Coop.				06291
	• Add the DSEs of each statio Enter the sum here and in line	RY "O" STATIONS: n.			2.00	
2	Instructions: In the column headed "Call of space G (page 3).					
Computation of DSEs for	In the column headed "DSE mercial educational station, gi			E as "1.0"; for	each network or noncom-	
Category "O"		C	ATEGORY "O" STATION	IS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	WKPD	0.250				
	WNPT-DT	0.250				
	WSMV-DT	0.250				
	WTVF-DT	0.250				
	WUPX-DT	1.000				
Add rows as						
necessary.		<mark></mark>				
Remember to copy		···			••	
all formula into new		<mark></mark>				. <mark>.</mark>
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Name	Ment Kant		: A Caan				ŝ	SYSTEM I
	West Kentu	cky Rural Telephon	e Coop.					0629
<b>3</b> Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 2 be carried ou Column 4 give the type Column 6	: CAPACITY ist the call sign of all dist 2: For each station, give correspond with the info 3: For each station, give 4: Divide the figure in co t at least to the third dec 5: For each independen -value as ".25." 6: Multiply the figure in co point. This is the station	the number of prmation given the total numb plumn 2 by the f cimal point. This t station, give the column 4 by the	hours your cable syste in space J. Calculate of eer of hours that the sta figure in column 3, and s is the "basis of carria ne "type-value" as "1.0 e figure in column 5, ar	em carried the sta only one DSE for of ation broadcast ov I give the result in ge value" for the s ." For each netwo	tion during the accounti each station. ver the air during the acc decimals in column 4. T station. rk or noncommercial ed n column 6. Round to n	counting period. This figure must ucational station, o less than the	
Capacity		1	CATEGOR	LAC STATIONS	COMPUTAT	ION OF DSEs	1	
	1. CALL SIGN	2. NUMB OF HC CARRI SYSTE	OURS IED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE			SE
					=	<mark>x</mark>	=	
			÷		=	x	=	
						x x		
			÷		=	x	=	
<b>4</b> Computation of DSEs for Substitute- Basis Stations				the letter "P" in columr	n 7 of space I); an		C C	
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of DSEs for Substitute- Basis Stations	space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN 1. CALL SIGN SUM OF DSE: Add the DSEs Enter the su TOTAL NUMB number of DSE	one or more live, nonneth For each station give th This figure should corre- Enter the number of day Divide the figure in colu This is the station's DSE 2. NUMBER OF PROGRAMS	work programs i en number of live espond with the ys in the calency imm 2 by the fig E (For more info UBSTITUTE 3. NUMB OF DA IN YEA + + + + SIS STATIONS part 5 of this so mounts from the	during that optional car re, nonnetwork program a information in space lar year: 365, except in ure in column 3, and g ormation on rounding, -BASIS STATION ER 4. DSE YS 4. DSE YS 5 R 5 = 5 = 5 chedule,	n 7 of space I); an riage (as shown by ms carried in subs I. n a leap year. ive the result in c see page (viii) of NS: COMPUTA I. CALL SIGN	d the word "Yes" in column stitution for programs that olumn 4. Round to no le the general instructions ATION OF DSES 2. NUMBER OF PROGRAMS 0.0	a 2 of at were deleted ass than the third in the paper SA3 for 3. NUMBER OF DAYS IN YEAR * * * * 0 0 e the tota 2.00	4. DS
of DSEs for Substitute- Basis Stations	space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN SIGN SUM OF DSE: Add the DSEs Enter the su TOTAL NUMBI number of DSE 1. Number of	one or more live, nonnet For each station give th This figure should corre- Enter the number of day Divide the figure in colu This is the station's DSE 2. NUMBER OF PROGRAMS S OF SUBSTITUTE-BAY of each station. um here and in line 3 of ER OF DSEs: Give the a is applicable to your syste	work programs i en number of live espond with the ys in the calency imm 2 by the fig E (For more info UBSTITUTE 3. NUMB OF DA IN YEA + + + + SIS STATIONS part 5 of this so mounts from the	during that optional car re, nonnetwork program a information in space lar year: 365, except in ure in column 3, and g ormation on rounding, -BASIS STATION ER 4. DSE YS 4. DSE YS 5 R 5 = 5 = 5 chedule,	n 7 of space I); an riage (as shown by ms carried in subs I. n a leap year. ive the result in c see page (viii) of NS: COMPUTA I. CALL SIGN	d the word "Yes" in column stitution for programs that olumn 4. Round to no le the general instructions ATION OF DSES 2. NUMBER OF PROGRAMS 0.0	a 2 of at were deleted ass than the third in the paper SA3 for 3. NUMBER OF DAYS IN YEAR * * * * * * * *	4. DS
of DSEs for Substitute- Basis Stations	space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN UN OF DSE: Add the DSEs Enter the st TOTAL NUMB number of DSE 1. Number of 2. Number of	For each station give th This figure should corre- Enter the number of day Divide the figure in colu This is the station's DSE 2. NUMBER OF PROGRAMS S OF SUBSTITUTE-BAY of each station. um here and in line 3 of ER OF DSEs: Give the a is applicable to your system of DSEs from part 2.	work programs i en number of live espond with the ys in the calency imm 2 by the fig E (For more info UBSTITUTE 3. NUMB OF DA IN YEA + + + + SIS STATIONS part 5 of this so mounts from the	during that optional car re, nonnetwork program a information in space lar year: 365, except in ure in column 3, and g ormation on rounding, -BASIS STATION ER 4. DSE YS 4. DSE YS 5 R 5 = 5 = 5 chedule,	n 7 of space I); an riage (as shown by ms carried in subs I. n a leap year. ive the result in c see page (viii) of NS: COMPUTA I. CALL SIGN	d the word "Yes" in column stitution for programs that olumn 4. Round to no le the general instructions ATION OF DSES 2. NUMBER OF PROGRAMS 0.0	a 2 of at were deleted ass than the third in the paper SA3 for 3. NUMBER OF DAYS IN YEAR * * * * 0 0 e the tota 2.00	4. DS

LEGAL NAME OF C							S	VSTEM ID# 062911	Name
Instructions: Blo	ck A must be com	pleted.		7 of the DSE sche	edule blank a	nd complete p	art 8, (page 16) o		6
<ul> <li>If your answer if</li> </ul>	"No," complete bl								
				ELEVISION M					Computation of 3.75 Fee
effect on June 24,	1981? plete part 8 of the plete blocks B and List the call signs under FCC rules instructions for th Satellite Televisi Enter the approp (Note the FCC ru A Stations carri 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfatheree instructions fo E Carried pursu *F A station pre G Commercial U M Retransmissie	schedule—E C below. BLOC s of distant st. and regulation to DSE Sche on Extension riate letter intu- ules and regules and regu	CK B: CARR ations listed in ons prior to Jui dule. (Note: TI and Localism dicating the ba lations cited b o the FCC ma diations cited b diations cited diations cited b diations cited b diations	isis on which you o elow pertain to tho rket quota rules [7 76.59(d)(1), 76.61(d), 9(c), 76.61(d), 76. iraph regarding su 'CC rules (76.7) ne or substitute ba contour, [76.59(d)(	AINDER OF F MITTED DS this schedule orther explana efers to an ex- carried a perm se in effect of 6.57, 76.59(b e)(1), 76.63(a) (a) referring bstitution of g sis prior to Ju 5), 76.61(e)(5)	PART 6 AND SES e that your system ation of permit cempt multicas nitted station n June 24, 19- ), 76.61(b)(c), 1) referring to 19 to 76.61(d) randfathered sine 25, 198 <sup>-</sup> 5), 76.63(a) re	7 stem was permitte ted stations, see t st stream as set fo 81. , 76.63(a) referring 76.61(e)(1 stations in th€	ed to carry the orth in the g tc	5./5 Fee
1. CALL	*(Note: For thos this schedule to 2. PERMITTED	determine the		etter "F" in column 2. PERMITTED	2, you must 3. DSE	1. CALL	worksheet on pag 2. PERMITTED	, 	_
SIGN	BASIS	0.05	SIGN	BASIS		SIGN	BASIS		-
WKPD WNPT-DT	C C	0.25 0.25							
WSMV-DT	D	0.25					·	···	
WTVF-DT	D	0.25							
WUPX-DT	Č	1.00					+		
							•		
	•						•	··	
								2.00	
		В	LOCK C: CO	MPUTATION OF	- 3.75 FEE				ļ
_ine 1: Enter the	e total number of	DSEs from	part 5 of this	schedule					
_ine 2: Enter the	e sum of permitte	ed DSEs fror	n block B ab	ove					
				r of DSEs subjec 7 of this schedu		rate.			
_ine 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.0	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375	and enter su	ım here						permited/ partially nonpermitted
Line 6: Enter tot	al number of DS	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 a	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

DSE SCHEDULE. PAGE 13.

	1							[	DSE SCHEDULE. PA	
Name	LEGAL NAME OF OWN								SYSTE	
Name	West Kentucky	Rural Telepho	ne Coop.						062	2911
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	<ul> <li>Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.</li> <li>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</li> <li>Column 2: Indicate the DSE for this station identifed by the letter "F" in column 2 of part 6 of the DSE schedule</li> <li>Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1)</li> <li>Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters</li> <li>(Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.</li> <li>A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, section: 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)).</li> <li>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)).</li> <li>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.</li> <li>Column 5: Indicate the Station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule</li> <li>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 enterer in block B, column 3 of part 6 for this station.</li> <li>IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verifcation from the designated statement of account on fle in the Licensing Division.</li> </ul>									
	1.0411					ON A PART-TIME AN				
	1. CALL	2. PRIOR DSE		COUNTING ERIOD		4. BASIS OF		RESENT	6. PERMITT	IED
	SIGN	DSE	Pi	ERIOD		CARRIAGE	L	JSE	DSE	
<b>7</b> 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	<ul> <li>Is any portion of the or</li> </ul>	cable system within	a top 100 majo	or television mar	ket a	as defned by section 7	6.5 of FCC	rules in effect J	une 24, 1981?	
	Yes—Complete	blocks B and C .				No-Proceed to	part 8			
	BLOCK B: C	arriage of VHF/Gra	de B Contour	Stations	BLOCK C: Computation of Exempt DSEs					
	Is any station listed ir commercial VHF stati or in part, over the ca Yes—List each s	n block B of part 6 th ion that places a gra ble system? tation below with its a	Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refe to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE							
	X No—Enter zero a	and proceed to part 8.				X No—Enter zero a	nd proceed t	υ μαπ δ.		
		DSE		DOE			Der			
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N DSE	
		<mark> </mark>					·····+			
		<mark>-</mark>								
		<mark> </mark>							·····	
		<mark></mark> -							·····	
		<mark> </mark>								
		<mark>  -</mark>					<u> </u>			
		<mark> -</mark>					······			
		└────┤───								
		Т	OTAL DSEs	0.00				TOTAL DS	Es (	0.00

DSE SCHEDULE. PAGE15.

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: West Kentucky Rural Telephone Coop.	SYSTEM ID# 062911	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section	Enter the amount of gross receipts from space K (page 7)	742,267.80	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated
	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	Exclusivity 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. X No—Complete section 4 below.		
-	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?     X Yes—Complete part 9 of this schedule.     No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the Datis 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)		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here	_	
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the D 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		

	1		DULE. PAGE 16.					
Name		we of owner of cable system: West Kentucky Rural Telephone Coop.	SYSTEM ID# 062911					
			002011					
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 of the		A. Enter 0.00300 of gross receipts (the amount in section 1)						
Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1)						
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here						
	D. Enter 0.00089 of gross receipts (the amount in section 1)							
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here						
		F. Multiply line D by line E and enter here ▶ \$						
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)						
		Syndicated Exclusivity Surcharge	<u></u> .					
<b>8</b> Computation of Base Rate Fee	You m 6 was • In blo • If you • If you blank What i were lo	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be to the station? A station is "partially distant" if, at the time your system carried it, some of your subscribers bocated within that station's local service area and others were located outside that area. For the definition of a station's "loce a rea," see page (v) of the general instructions.	low					
		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?						
	[	X Yes—Complete part 9 of this schedule. No—Complete the following sections.						
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE						
	Section 1	Enter the amount of gross receipts from space K (page 7)						
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)						
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.						
		A. Enter 0.01064 of gross receipts (the amount in section 1)						
		B. Enter 0.00701 of gross receipts (the amount in section 1)						
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here						
		D. Multiply line B by line C and enter here						
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)						
		Base Rate Fee	0.00					

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Nama
West	Kentucky Rural Telephone Coop. 062911	Name
0"		
Section 4	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	8
	(the amount in section 1)	
	B. Enter 0.00701 of gross receipts	Computation
	(the amount in section 1)►	Computation of
		Base Rate Fee
	C. Multiply line B by 3.000 and enter here ▶	
	D. Enter 0.00330 of gross receipts	
	(the amount in section 1)	
	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	
IMPOR	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall	
	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in	9
Space		9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this	Computation
	on, you must:	of Base Rate Fee
First <sup>.</sup> [	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and
station	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of	Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity Surcharge
-	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However,	Partially Distant
	cable system is wholly located outside all major television markets, complete block A only.	Stations, and
How to	Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
	For each community served, determine the local service area of each wholly distant and each partially distant station you	Stations
	to that community.	
-	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by	
	ne token, the station is distant to the subscriber.)	
•	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
	Iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber	
groups.		
In each	section:	
	fy the communities/areas represented by each subscriber group.	
	he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the bers in the group.	
• lf:		
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3,	
and 4 o	f this schedule; or,	
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
•	The DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions	
	paper SA3 form.	
•	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding	
	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your	
	calculations on the form.	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY	STEM
Name	West Kentucky Rural Telephone Coop.	0629
	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	2
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream.	5
	You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNE West Kentucky Ru						SY	STEM ID# 062911	Name
BI				TE FEES FOR EACH				
		SUBSCRIBER GROU	Р			SUBSCRIBER GROUI	P	9
COMMUNITY/ AREA	Beulah			COMMUNITY/ AREA	Brazil, E	aton		✓ Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Swadiaatad
								Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
						_		
					<b>.</b>			
	······							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 133,	608.20	Gross Receipts Secon	d Group	\$ 2	2,268.03	
Base Rate Fee First G	•	\$	0.00	Base Rate Fee Secon	•	\$ SUBSCRIBER GROUI	0.00	
		SUBSCRIBER GROU	Р					
COMMUNITY/ AREA	Browns	Grove & Others		COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				WSMV-DT	0.25			
	•							
		-				_		
					<b>.</b>			
					+			
Total DSEs			0.00	Total DSEs			0.25	
Gross Receipts Third G	Group	\$7,	422.68	Gross Receipts Fourth	Group	<u>\$</u> 3	7,113.39	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	98.72	
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes a	bove.	\$	704.06	

LEGAL NAME OF OWN							SYSTEM ID# 062911	Name
В		COMPUTATION OF		TE FEES FOR EA	CH SUBSCR	BER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GR		0
COMMUNITY/ AREA Coldwater, Dexter, Kirksey			COMMUNITY/ AR	EA Cottage	Grove, Buchan	an, Puryear	<b>9</b> Computatio	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				WNPT-DT	0.25			Base Rate F
				WUPX-DT	1.00			and
								Syndicated
	<mark></mark>						·····	Exclusivity
	<mark>.</mark>							Surcharge
							·····	for Partially
	<mark></mark>							Distant
		-				-		Stations
Total DSEs			0.00	Total DSEs			1.25	
Gross Receipts First G	iroup	\$ 259	,793.73	Gross Receipts Se	cond Group	\$	7,422.68	
	loup	<u> </u>	,			÷		
<b>Base Rate Fee</b> First G	iroup	\$	0.00	Base Rate Fee Se	cond Group	\$	91.99	
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GR	OUP	
COMMUNITY/ AREA	Cunnin	gham, Kirbyton		COMMUNITY/ ARI	EA Faxon, I	I.Grove, L.Grov	re, Lville	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-		WKPD	0.25			
	<mark></mark>							
		-				-		
				]		]		
	<mark></mark>	-	. <b> </b>					
	<mark></mark>							
	<mark></mark>							
	··						·····	
	<mark></mark>		<b>.</b>				·····	
	<b>.</b>		<b>.</b>					
Total DSEs		•	0.00	Total DSEs			0.25	
Gross Receipts Third (	Jroup	<u>\$</u> 133	,608.20	Gross Receipts Fo	urth Group	\$	22,268.03	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fo	urth Group	\$	59.23	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the box	es above.	\$		
	x 5, ii⊓e 1, 9	space L (page /)				\$		

LEGAL NAME OF OWNE West Kentucky Ru						SY	STEM ID# 062911	Name
BL				TE FEES FOR EACH	SUBSCR	IBER GROUP		
NINTH SUBSCRIBER GROUP					>	٥		
COMMUNITY/ AREA Mason Hall				COMMUNITY/ AREA	Melber			<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WKPD	0.25	0.112 0.011	201		501		202	Base Rate Fee
WTVF-DT	0.25							and
								Syndicated
								Exclusivity
								Surcharge
						-		for
						_		Partially
								Distant
								Stations
							h	
							<u> </u>	
Total DSEs	• •	<u>-</u>	0.50	Total DSEs			0.00	
Gross Receipts First Gr	nun	\$ 7,	422.68	Gross Receipts Secon	d Group	\$	7,422.69	
	oup	<u> </u>	122.00			<u> </u>	,+22.00	
Base Rate Fee First Gr		\$	39.49	Base Rate Fee Second		\$	0.00	
EL	EVENTH	SUBSCRIBER GROU	IP		TWELVTH	SUBSCRIBER GROUP	)	
COMMUNITY/ AREA	Yorkvill	e		COMMUNITY/ AREA	Fairdeal	ing, Hardin		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WSMV-DT	0.25							
WTVF-DT	0.25							
						-		
						_		
						_	·····	
							·····	
							<u> </u>	
						-	<u> </u>	
							<b>†</b>	
Total DSEs			0.50	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$ 74,	226.78	Gross Receipts Fourth	Group	<u>\$</u> 22	2,268.03	
Base Rate Fee Third Group \$ 394.89		394.89	Base Rate Fee Fourth	Group	\$	0.00		
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes a	bove.	\$		

	FORM	SA3E.	PAGE	19.
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LEGAL NAME OF OWNE West Kentucky Ru						SY	STEM ID# 062911	Name
				TE FEES FOR EACH				
		SUBSCRIBER GROU	JP	FOURTEENTH SUBSCRIBER GROUP				9
COMMUNITY/ AREA	Hazel, I	New Concord		COMMUNITY/ AREA			0	-
			DOF				DOF	Computation
CALL SIGN WKPD	DSE 0.25	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
	0.23							and
						-		Syndicated
								Exclusivity
								Surcharge
								for
						-		Partially
								Distant
								Stations
Total DSEs			0.25	Total DSEs 0.00			0.00	
Gross Receipts First Gr	oup	<u>\$</u> 7,	422.68	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	19.74	Base Rate Fee Second	d Group	\$	0.00	
FIF	TEENTH	SUBSCRIBER GROU	JP	S	IXTEENTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						_		
		]						
						-		
						-		
						-	<b>.</b>	
Total DSEs	· .		0.00	Total DSEs		· -	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th	e base rat	e fees for each subsc	riber group	as shown in the boxes a	above.			
Enter here and in block						\$		

#### FORM SA3E. PAGE 19.

LEGAL NAME OF OWNE West Kentucky Ru						5	YSTEM ID# 062911	Name
BL	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EA	CH SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA Beulah			COMMUNITY/ AREA Brazil, Eaton				9 Computatio	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE				of
CALL OIGH	DOL	UALL DION	DOL	WTVF-DT	0.25	OALL OIGH	DOL	Base Rate F
	· ·····			WSMV-DT	0.25			
					0.25	_	····•	and
								Syndicate
								Exclusivit
								Surcharg
						_		for
								Partially
								Distant
						-		Stations
		-				-		
					•••••• <mark>•</mark> ••••••		····	
					••••••		····	
					••••••		<mark></mark>	
Total DSEs			0.00	Total DSEs			0.50	
Gross Receipts First G	roup	<u>\$ 133,</u>	608.20	Gross Receipts See	cond Group	\$	22,268.03	
<b>3ase Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Sec	cond Group	\$	417.53	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Browns	Grove & Others		COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
				][				
	<b> </b>				•••••	-		
							•••• <mark>•</mark> ••••••	
					•••••• <mark>•••••</mark> ••••••		····	
					••••••		<mark></mark>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	<u>\$</u> 7,	422.68	Gross Receipts For	urth Group	\$	37,113.39	
			0.00	Base Bate 5 - 5				
	noup	\$	0.00	Base Rate Fee Fou	arun Group	\$	0.00	
Base Rate Fee Third G								
Base Rate Fee Third G								

# **Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNE			•			S	YSTEM ID# 062911	Name
В				ATE FEES FOR EACH			10	
COMMUNITY/ AREA		SUBSCRIBER GRO		SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA Cottage Grove, Buchanan, Puryear				9
	ooland		JC y		oonage		n, r arycar	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<mark></mark>							and Syndicated
						_		Exclusivity
								Surcharge
	<mark></mark>					_		for Partially
								Distant
						-		Stations
	<mark>.</mark>					_		
	<mark></mark>							
	<mark>.</mark>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Froup	<u>\$</u> 259	,793.73	Gross Receipts Secon	d Group	\$	7,422.68	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Cunnin	gham, Kirbyton		COMMUNITY/ AREA	Faxon, I	H.Grove, L.Grove	, Lville	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			·		·			
						-		
	<mark></mark>							
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 0				Gross Receipts Fourth	Group	\$	22,268.03	
		<u>\$</u> 133	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				ш				
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes a	above.	\$		
	x 5, III e 1, S	space L (paye 1)				Ψ		

## FORM SA3E. PAGE 19.

EGAL NAME OF OWNE							SYSTEM ID# 062911	Nam
В				TE FEES FOR EAC				
	NINTH	SUBSCRIBER GRO	UP	<u>  </u>	TENT	SUBSCRIBER GRO	OUP	9
COMMUNITY/ AREA	Mason	Hall		COMMUNITY/ ARE	A Melber			_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computa of
								Base Rat
								and
								Syndica
								Exclusiv
								Surchar
	<mark></mark>		<mark></mark>					for
	<mark></mark>							Partial
	<mark></mark>		<mark></mark>					Distan
	<mark></mark>		<mark></mark>			•		Station
	<mark></mark>		<mark></mark>			•	•••••	
	··		<mark></mark>					
	<mark></mark>		••••••••••••••••••••••••••••••••••••••					
		•						
otal DSEs		••	0.00	Total DSEs		*	0.00	
		¢ 7	,422.68		and Crown	•	7,422.69	
ross Receipts First G	noup	<u>\$</u> 7	,422.00	Gross Receipts Sec	ona Group	\$	7,422.03	
<b>ase Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
E	LEVENTH	SUBSCRIBER GRO	UP		TWELVTH	SUBSCRIBER GRO	OUP	
OMMUNITY/ AREA	Yorkvil	le		COMMUNITY/ ARE	A Fairdea	aling, Hardin		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	202		202		202	0.1.22 0.011	201	
		_						
	<mark></mark>		<mark></mark>					
	<mark></mark>		<mark></mark>					
	<mark></mark>		<mark>.  </mark>					
	<mark></mark>		<mark></mark>		·····	•		
	<mark></mark>	-	<mark></mark>					
	<mark></mark>		••••••••••••••••••••••••••••••••••••••				·····	
	··							
	"							
				]				
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 74,226.78		,226.78	Gross Receipts Fou	rth Group	\$	22,268.03		
			·		I.			
ase Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				Ш		F		
ase Rate Fee: Add the inter here and in block			criber group	as shown in the boxe	s above.	\$		
	. ,							

# **Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNE West Kentucky Ru			-			S	YSTEM ID# 062911	Name
				TE FEES FOR EACH			ID	
COMMUNITY/ AREA		SUBSCRIBER GROU	JP	1	FOURTEENTH SUBSCRIBER GROUP       COMMUNITY/ AREA     0			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and Ourselise stand
					···			Syndicated Exclusivity
								Surcharge
								for Dortiolly
								Partially Distant
								Stations
					···			
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 7	,422.68	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
FI	TEENTH	SUBSCRIBER GROU	JP	5	SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
					···			
						-		
					···			
					<mark></mark>		<mark></mark>	
					<mark></mark>			
Total DSEs			0.00	Total DSEs	•		0.00	
		0.00	Gross Receipts Fourt	h Group	\$	0.00		
					•			
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th	e base rat	te fees for each subso	riber aroun	as shown in the boxes	above			
Enter here and in block						\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E, PAGE 20. SYSTEM ID#
Name	West Kentucky Rural Telephone Coop.	062911
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI	VITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television marke by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of		Second 50 major television market
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commerci	al VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity Surcharge for	this schedule. <b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter <b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of I	zero. DSEs used to compute the surcharge.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the for schedule. In making this computation, use gross receipts figure your actual calculations on this form.	
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 1: Enter the Exempt DSEs
	Line 2: Enter the Exempt DSES Line 2: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 2: Enter the Exempt DSES Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page 7)	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E, PAGE 20. SYSTEM ID#
Name	West Kentucky Rural Telephone Coop.	062911
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of		Second 50 major television market
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commerc	ial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity Surcharge for Partially	<ul> <li>this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group fo Exempt DSEs in block C, part 7 of this schedule. If none enter</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of</li> <li>Step 4: Compute the surcharge for each subscriber group using the for</li> </ul>	zero. DSEs used to compute the surcharge.
Distant Stations		es applicable to the particular group. You do not need to show
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 2: Ender the Exempt Soles	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	SEVENTH SUBSCRIBER GROUP	EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs.	Line 2: Enter the Exempt DSEs.
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea in the boxes above. Enter here and in block 4, line 2 of space L (page 7	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: West Kentucky Rural Telephone Coop.	SYSTEM ID# 062911
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIV	
9	If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:	station is not exempt in Part 7, you mustalso compute a
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and Syndicated Exclusivity	<ul> <li>Step 1: In line 1, give the total DSEs by subscriber group for commercia this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group for</li> </ul>	
Surcharge for Partially Distant Stations	<ul> <li>Exempt DSEs in block C, part 7 of this schedule. If none enter a</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of D</li> <li>Step 4: Compute the surcharge for each subscriber group using the forr schedule. In making this computation, use gross receipts figure your actual calculations on this form.</li> </ul>	SEs used to compute the surcharge. nula outlined in block D, section 3 or 4 of part 7 of this
	NINTH SUBSCRIBER GROUP	TENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	ELEVENTH SUBSCRIBER GROUP	TWELVTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for eac in the boxes above. Enter here and in block 4, line 2 of space L (page 7)	

News	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	West Kentucky Rural Telephone Coop.	062911
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI	VITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television marke by section 76.5 of FCC rules in effect on June 24, 1981:	· · · ·
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commerci	al VHE Grade B contour stations listed in block A part 9 of
Syndicated Exclusivity Surcharge for Partially Distant Stations	<ul> <li>Step 1: In line 1, give the total DOL's by subscriber group for coninieration of the schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter Step 3: In line 3, subtract line 2 from line 1. This is the total number of I Step 4: Compute the surcharge for each subscriber group using the for schedule. In making this computation, use gross receipts figure your actual calculations on this form.</li> </ul>	the VHF Grade B contour stations that were classified as zero. DSEs used to compute the surcharge. mula outlined in block D, section 3 or 4 of part 7 of this
	THIRTEENTH SUBSCRIBER GROUP	FOURTEENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FIFTEENTH SUBSCRIBER GROUP	SIXTEENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page 7)	