This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

| FOR COPYRIGHT OFFICE USE ONLY | | | |
|-------------------------------|----------------------|--|--|
| DATE RECEIVED | AMOUNT | | |
| 08/29/2019 | \$ ALLOCATION NUMBER | | |

email to:

Return completed workbook by

coplicsoa@loc.gov

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

| Α | ACCOUNTING PERIOD COVERED BY THIS STATEMENT: | | | |
|----------------------|---|--|-----------------------------------|-----------------|
| Accounting Period | 2019/1 | | | |
| Period | | | | |
| B Owner | Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting the if this is the system's first filing. If not, enter the system's ID | ess of the cable system on the last day of the counting perion | em the accounting period should s | |
| | LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM | | | |
| | MCC Iowa, LLC (Ottumwa, IA) | | | |
| | | | | |
| | | | | 03517420191 |
| | | | | 035174 2019/1 |
| | | | | |
| | ONE MEDIACOM WAY | | | |
| | MEDIACOM PARK, NY 10918 | | | |
| | INSTRUCTIONS: In line 1, give any business or trade names used to id | dentify the busines | ss and operation of the syste | em unless these |
| С | names already appear in space B. In line 2, give the mailing address of | | | |
| System | 1 IDENTIFICATION OF CABLE SYSTEM: | | | |
| | MAILING ADDRESS OF CABLE SYSTEM: | | | |
| | 2 (Number, street, rural route, apartment, or suite number) | | | |
| | (City, town, state, zip code) | | | |
| D | Instructions: For complete space D instructions, see page 1b. Identify | only the fret comm | nunity served below and rel | ist on nage 1h |
| _ | with all communities. | orny the not com | numity served below and ref | of on page 15 |
| Area Served | CITY OR TOWN | STATE | | |
| First | Ottumwa | IA | | |
| Community | Below is a sample for reporting communities if you report multiple cha | nnel line-ups in S | pace G. | |
| | CITY OR TOWN (SAMPLE) | STATE | CH LINE UP | SUB GRP# |
| Sample | Alda | MD | A | 1 |
| Campic | Alliance | MD | В | 2 |
| | Gering | MD | В | 3 |

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

| TORINI SASE. PAGE 10. | | | | 1 | | | |
|---|--------------------|--------------------|------------|------------------------|--|--|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM: | | | SYSTEM ID# | | | | |
| MCC Iowa, LLC (Ottumwa, IA) | | | 035174 | | | | |
| Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. | | | | | | | |
| Note: Entities and properties such as hotels, apartments, condominiums, or mobile hom below the identified city or town. | e parks should be | e reported in pare | ntheses | | | | |
| If all communities receive the same complement of television broadcast stations (i.e., on all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each redesignated by a number (based on your reporting from Part 9). | e column blank. İf | you report any st | ations | | | | |
| When reporting the carriage of television broadcast stations on a community-by-community channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns by | a subscriber grou | | | | | | |
| CITY OR TOWN | STATE | CH LINE UP | SUB GRP# | | | | |
| Ottumwa | IA | AA | 1 | First | | | |
| Agency | IA | AA | 1 | Community | | | |
| Wapello | IA | AA | 2 | | | | |
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| | | | | See instructions for | | | |
| | | | | additional information | | | |
| | | | | on alphabetization. | | | |
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| | | | | Add rows as necessary. | | | |
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Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

MCC Iowa, LLC (Ottumwa, IA)

SYSTEM ID#

035174

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

| BLOCK 1 | | | BLOC | K 2 | |
|--|-----------------------|-------------|---------------------|-----------------------|------|
| CATEGORY OF SERVICE | NO. OF SUBSCRIBERS | RATE | CATEGORY OF SERVICE | NO. OF SUBSCRIBERS | RATE |
| Residential: | | | | | |
| Service to first set | 4,434 | 29.95-51.54 | | | |
| Service to additional set(s) | | | | | |
| FM radio (if separate rate) | | | | | |
| Motel, hotel | | | | | |
| Commercial | 9 | 29.95-51.54 | | | |
| Converter | | | | | |
| Residential | | | | | |
| Non-residential | | | | | |
| | 1 | 1 | | 1 | 1 |

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

| | BLOCK 1 | | | | | | |
|---|-------------|-------------------------------|-------------|---------------------|----------|--|--|
| CATEGORY OF SERVICE | RATE | CATEGORY OF SERVICE | RATE | CATEGORY OF SERVICE | RATE | | |
| Continuing Services: | | Installation: Non-residential | | | | | |
| Pay cable | PP | Motel, hotel | | Family Cable | \$ 74.95 | | |
| Pay cable—add'l channel | PP | Commercial | | | | | |
| Fire protection | | Pay cable | | | | | |
| •Burglar protection | | Pay cable-add'l channel | | | | | |
| Installation: Residential | | Fire protection | | | | | |
| First set | \$ 99.99 | Burglar protection | | | | | |
| Additional set(s) | 15.00-29.00 | Other services: | | | | | |
| • FM radio (if separate rate) | | Reconnect | \$ 29.00 | | | | |
| Converter | \$ 10.50 | Disconnect | | | | | |
| | | Outlet relocation | 15.00-29.00 | | | | |
| | | Move to new address | | | | | |
| | | | | | | | |

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name MCC Iowa, LLC (Ottumwa, IA) 035174 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 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) KCCI/KCCI(HD) C 8 Ν No Des Moines, IA KCCI-DT2 (MeTV) 8.2 ı No Des Moines, IA See instructions for additional information **KDSM-FOX** 16 Des Moines, IA ı No on alphabetization. 12 Ε No KIIN/KIIN(HD) PB Iowa City, IA KIIN-DT2 PBS KID 12.2 Ε No Iowa City, IA KIIN-DT3 PBS Wo 12.3 Ε No Iowa City, IA KIIN-DT4 PBS Cre Ε 12.4 No Iowa City, IA KTVO/KTVO(HD) Ν Kirksville, MO 33 No KTVO-DT2/KTVO-Ν Kirksville, MO 33.2 No KYOU/KYOU(HD) 15 ı No Ottumwa, IA **KYOU-DT2/KYOU** 15.2 Ν No Ottumwa, IA **KYOU-DT3 Grit** 15.3 No Ottumwa, IA ı WHO/WHO(HD) N 13 Ν No Des Moines, IA KTVO-DT3 COME 33.3 ı No Kirksville, MO KYOU-DT4/KYOU 15.4 ı No Ottumwa. IA

| FORM SA3E. PAGE 3. | | | | | | |
|---|---|--|--|---|--|--|
| LEGAL NAME OF OW | | | | | SYSTEM ID# | Name |
| MCC Iowa, LL | C (Ottumwa, | IA) | | | 035174 | |
| PRIMARY TRANSMITT | TERS: TELEVISIO | ON | | | | |
| In General: In space carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program be Substitute Basis basis under specifc F • Do not list the station was carried • List the station here basis. For further i in the paper SA3 froum 1: List ea each multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of licen on which your cables Column 3: Indicated educational station, be (for independent mult For the meaning of the Column 5: If you cable system carried the distant state For the retransmis of a written agreement the cable system and tion "E" (exempt). For explanation of these telloumn 6: Give the | G, identify even system during the system during the stitions in effect or 76.61(e)(2) and (asis, as explaine Stations: With 16 CC rules, regular here in space donly on a subset, and also in spanformation concorm. In associated with A-2". Simulcast the channel numbers as For example system carried the in each case where the system carried the sestems, see particularly the distant station is outside wice area, see particularly the distant station is outside wice area, see particularly the distant station on a part-time sign of a distant at entered into on a primary transmit simulcasts, also three categories are location of each | y television standard accounting in June 24, 194, or 76.63 (rd d in the next) respect to any ations, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in the local service (v) of the local service (| period, except 81, permitting the referring to 76.6 paragraph. A distant stations orizations: tit in space I (the stion was carried the basis station to the period of the reported in the referring to the reported in the re | (1) stations carried to carriage of certa- tile (2) and (4))]; as a carried by your of the Special Statement of both on a substitution, see page (v) on a program service the er-the-air designation of the television statistication, D.C. This the television statistication, on the television of the television statistication, on the television of the television statistication, on the television statistication, on the television statistication, on the television statistication of the television of | es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system | Primary Transmitters: Television |
| Note: If you are utilizi | ing multiple char | nnel line-ups, | use a separate | space G for each | channel line-up. | |
| | T | CHANN | EL LINE-UP | AA | | |
| 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 | |
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ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 035174 MCC Iowa, LLC (Ottumwa, IA) PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

| FORM SA3E. PAGE 5. | | | | | | | ACCOUNTING | PERIOD: 2019 | |
|---|---|--|---|--|---|--|----------------------|--|--|
| LEGAL NAME OF OWNER OF MCC lowa, LLC (Ottun | | EM: | | | | ; | SYSTEM ID# 035174 | Name | |
| | | | | | | | 035174 | | |
| SUBSTITUTE CARRIAGI | E: SPECIA | L STATEMEN | IT AND PROGRAM LOC | ; | | | | | |
| substitute basis during the a | General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a ubstitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further xplanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. | | | | | | | | |
| 1. SPECIAL STATEMEN | | | | o gonorar moa | 4011011011000 | III III PA | por er to totti. | Carriage: | |
| During the accounting per broadcast by a distant sta | tion? | • | • | • | | Yes | XNo | Special Statement an Program Log | |
| Note: If your answer is "No log in block 2. | ", leave the | rest of this pag | ge blank. If your answer is | "Yes," you mu | ıst complete | the progran | m | | |
| period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love I Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes. stated as "6:00–6:30 p.m." | ace, please a of every nor distant stati gulations, o tion. Do no Lucy" or "NE m was broad sign of the sadcast static adian static and and day we "5/7." es when the Example: a er "R" if the and regulation ogramming | attach addition nnetwork televion and that your authorization t use general of BA Basketball: deast live, ente station broadca by is location (the when your sys as substitute pro a program carri listed program ons in effect du | al pages. ision program (substitute pur cable system substitute s. See page (vi) of the gereategories like "movies", o 76ers vs. Bulls." r "Yes." Otherwise enter "I asting the substitute programe community to which the community with which the tem carried the substitute gram was carried by your ed by a system from 6:01: was substituted for programing the accounting period | orogram) that, and for the program that, and for the program instruction is licer station in the licer station is licer station in the licer station is licer station in the licer station in the licer station is licer station in the licer station in the licer station is licer station in the licer station in the licer station is licer station in the licer station in the licer station is licer station in the licer station in the licer station is licer station in the licer station is licer station in the licer station is licer station in the licer station in the licer station is licer station in the lic | during the a ramming of ins located in List specificated by the attified). In the second part of the second | accounting another star the paper c program FCC or, in with the mores accurate hould be was required listed progulations in | nth ly | | |
| S | SUBSTITUT | E PROGRAM | | WHEN SUBSTITUTE CARRIAGE OCCURRED 7. REASI | | | | | |
| 1. TITLE OF PROGRAM | 2. LIVE? Yes or No | 3. STATION'S CALL SIGN | 4. STATION'S LOCATION | 5. MONTH AND DAY | | TIMES — TO | DELETION | | |
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ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 6.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

MCC Iowa, LLC (Ottumwa, IA)

SYSTEM ID#

035174

J

Part-Time Carriage Log

PART-TIME CARRIAGE LOG

In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.

Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.

Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period.

- Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10"
- State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.—3:15 a.m. app."
- You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m."
 12:00 p.m."

| | | DAT | ES AND HOURS | OF PART-TIME CARI | RIAGE | | | |
|-------------|------|-------------|--------------|-------------------|-------|------------------------|---------------|---|
| CALL SIGN - | WHEN | CARRIAGE OC | | CALL SIGN | WHEN | WHEN CARRIAGE OCCURRED | | |
| O'NEE O'O'N | DATE | FROM | DURS TO | SALE SIGIV | DATE | H FROM | OURS TO |) |
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| | AL NAME OF OWNER OF CABLE SYSTEM: C Iowa, LLC (Ottumwa, IA) | | TEM ID# 035174 | Name | | | | | |
|--|--|--------------------------------------|-------------------|--|--|--|--|--|--|
| GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. | | | | | | | | | |
| COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. | | | | | | | | | |
| bloc If pa 3 be | art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should back 3 below. art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow. art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be block 4 below. | entered on line 2 in block | | | | | | | |
| | MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here. This is your minimum fee. | e is 1.064 percent of the \$ 1,115,4 | 12.78 67.99 | | | | | | |
| Block 2 | DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. No—Leave block 3 below blank and complete the DSE schedule. | nn 4, you must check od? | | | | | | | |
| Block 3 | Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero | \$ | - | | | | | | |
| | Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero | | 0.00 | | | | | | |
| | Line 3. Add lines 1 and 2 and enter here | \$ | - | | | | | | |
| Block 4 | Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 | | 0.00 | Cable systems submitting additional deposits under Section 111(d)(7) | | | | | |
| | (Interest Worksheet) | \$ 72 | 0.00 25.00 | should contact the Licensing additional fees. Division for the | | | | | |
| | TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here | | 92.99 | appropriate form for submitting the additional fees. | | | | | |
| | general instructions located in the paper SA3 form for more information.) | | | | | | | | |

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# | | | | | | | |
|----------------------------|--|--------------------------|--|--|--|--|--|--|--|
| Name | MCC Iowa, LLC (Ottumwa, IA) | 035174 | | | | | | | |
| | CHANNELS | | | | | | | | |
| M | Instructions: You must give (1) the number of channels on which the cable system carried television broadcast | t stations | | | | | | | |
| 01 | to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. | | | | | | | | |
| Channels | Enter the total number of channels on which the cable | | | | | | | | |
| | system carried television broadcast stations | 23 | | | | | | | |
| | | | | | | | | | |
| | 2. Enter the total number of activated channels | | | | | | | | |
| | on which the cable system carried television broadcast stations and nonbroadcast services | 71 | | | | | | | |
| | and nonbroadcast services | | | | | | | | |
| N | INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual | | | | | | | | |
| N | we can contact about this statement of account.) | | | | | | | | |
| Individual to | | | | | | | | | |
| Be Contacted | Name Konnoth I Kohro | 045 442 2762 | | | | | | | |
| for Further Information | Name Kenneth J. Kohrs Telephone 845-443-2762 | | | | | | | | |
| | Address One Mediagom Way | | | | | | | | |
| | Address One Mediacom Way (Number, street, rural route, apartment, or suite number) | | | | | | | | |
| | Mediacom Park, NY 10918 | | | | | | | | |
| | (City, town, state, zip) | | | | | | | | |
| | Email Copyrights@mediacomcc.com Fax (optional) | | | | | | | | |
| | | | | | | | | | |
| | CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office reg | ulations | | | | | | | |
| O | CENTIFICATION (This statement of account must be certified and signed in accordance with copyright Office reg | guiations. | | | | | | | |
| Certifcation | • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) | | | | | | | | |
| | | | | | | | | | |
| | (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space | e B; or | | | | | | | |
| | | | | | | | | | |
| | (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or | e system as identified | | | | | | | |
| | _ | 511 | | | | | | | |
| | (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as or in line 1 of space B. | wher of the cable system | | | | | | | |
| | I have a construct the statement of account and beauty, declare under a such, of law that all statements of fact and in | and beautie | | | | | | | |
| | I have examined the statement of account and hereby declare under penalty of law that all statements of fact contain are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. | ied nerein | | | | | | | |
| | [18 U.S.C., Section 1001(1986)] | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | /s/ Kenneth J. Kohrs | | | | | | | | |
| | X No. House St. House | | | | | | | | |
| | Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor | in the box and press the | | | | | | | |
| | "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus | | | | | | | | |
| | Typed or printed name: Kenneth J. Kohrs | | | | | | | | |
| | *** | | | | | | | | |
| | | | | | | | | | |
| | Title: Vice President, Financial Reporting | | | | | | | | |
| | (Title of official position held in corporation or partnership) | | | | | | | | |
| | | | | | | | | | |
| | Date: August 28, 2019 | | | | | | | | |

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

U.S. Copyright Office

| LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# | Name |
|--|---|---|
| MCC Iowa, LLC (Ottumwa, IA) | 035174 | Name |
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act be lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system she scribers and amounts collected from subscribers receiving secondary transmissions pursuant. For more information on when to exclude these amounts, see the note on page (vii) of the general inspaper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary made by satellite carriers to satellite dish owners? X NO | m for the basic all not include sub- to section 119." tructions in the | Special Statement Concerning Gross Receipts Exclusion |
| YES. Enter the total here and list the satellite carrier(s) below | | |
| Name Mailing Address Mailing Address Mailing Address | | |
| INTEREST ASSESSMENTS | | |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 | | Q |
| Line 1 Enter the amount of late payment or underpayment | | Interest Assessment |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here | - days | |
| Line 3 Multiply line 2 by the number of days late and enter the sum here | x 0.00274 | |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7) | (interest charge) | |
| * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. | | |
| ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. | | |
| NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyl please list below the owner, address, first community served, accounting period, and ID number as gifling. | | |
| Owner Address | | |
| First community served Accounting period ID number | | |
| | | |

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

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 carried by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

Step 1: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of 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 be all the control of the | |

Note that local stations are not counted at all in computing DSEs. $\label{eq:decomposition}$

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE SCHEDULE

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

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

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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



| | Distant Stations Carried | | Identification | of Subscriber Groups | |
|---|--------------------------|-------|----------------|------------------------|------------------|
| | STATION | DSE | CITY | OUTSIDE LOCAL | GROSS RECEIPTS |
| n | A (independent) | 1.0 | | SERVICE AREA OF | FROM SUBSCRIBERS |
| | B (independent) | 1.0 | Santa Rosa | Stations A, B, C, D ,E | \$310,000.00 |
| | C (part-time) | 0.083 | Rapid City | Stations A and C | 100,000.00 |
| | D (part-time) | 0.139 | Bodega Bay | Stations A and C | 70,000.00 |
| | E (network) | 0.25 | Fairvale | Stations B, D, and E | 120,000.00 |
| | TOTAL DSFs | 2 472 | | TOTAL GROSS RECEIPTS | \$600,000,00 |

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

| | | 40,0000 | | | |
|------------------------------|--------------|-----------------------------|--------------|-----------------------------|--------------|
| First Subscriber Group | | Second Subscriber Group | | Third Subscriber Group | |
| (Santa Rosa) | | (Rapid City and Bodega Bay) | | (Fairvale) | |
| Gross receipts | \$310,000.00 | Gross receipts | \$170,000.00 | Gross receipts | \$120,000.00 |
| DSEs | 2.472 | DSEs | 1.083 | DSEs | 1.389 |
| Base rate fee | \$6,497.20 | Base rate fee | \$1,907.71 | Base rate fee | \$1,604.03 |
| \$310,000 x .01064 x 1.0 = | 3,298.40 | \$170,000 x .01064 x 1.0 = | 1,808.80 | \$120,000 x .01064 x 1.0 = | 1,276.80 |
| \$310,000 x .00701 x 1.472 = | 3,198.80 | \$170,000 x .00701 x .083 = | 98.91 | \$120,000 x .00701 x .389 = | 327.23 |
| Base rate fee | \$6,497.20 | Base rate fee | \$1,907.71 | Base rate fee | \$1,604.03 |

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

| DSE SCHEDULE. PAG | GE 11. (CONTINUED) | | | | | |
|----------------------|----------------------------------|--------------------|----------------------------|--|---------------------------|----------|
| 4 | LEGAL NAME OF OWNER OF CABLE | E SYSTEM: | | | S | STEM ID# |
| 1 | MCC Iowa, LLC (Ottumy | va, IA) | | | | 035174 |
| | SUM OF DSEs OF CATEGOR | Y "O" STATIO | NS: | | | |
| | Add the DSEs of each station | | | | | |
| | Enter the sum here and in line | 1 of part 5 of thi | s schedule. | | 0.00 | |
| | Instructions: | | | L | | 1 |
| 2 | In the column headed "Call S | Sian": list the ca | III signs of all distant s | stations identified by th | ne letter "O" in column 5 | |
| | of space G (page 3). | | | | | |
| Computation | In the column headed "DSE" | | | the DSE as "1.0"; for ϵ | each network or noncom- | |
| of DSEs for | mercial educational station, giv | e the DSE as ". | | EATIONIC DOE: | | |
| Category "O" | CALL CICAL | DCE | CATEGORY "O" ST | | CALL CION | DOE |
| Stations | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
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| Add rows as | | | | | | |
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| Remember to copy | | | | | | |
| all formula into new | | | | | | |
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| Name | | DWNER OF CABLE SYSTEM: LC (Ottumwa, IA) | | | | | , | SYSTEM ID# 035174 |
|---|--|---|--|--|---|---|---|----------------------|
| Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel | Column 2 figure should a Column 3 Column 4 be carried out Column 5 give the type- Column 6 | CAPACITY st the call sign of all dista the call sign of all dista from each station, give the correspond with the inform from each station, give the color of the color from each station in the color from each independent station as ".25." from Multiply the figure in color from each independent station is the station's | he number of he mation given in he total number umn 2 by the fig mal point. This is station, give the fullumn 4 by the fil | ours your cable syste space J. Calculate or of hours that the stature in column 3, and s the "basis of carriag "type-value" as "1.0." gure in column 5, and gure in column 5, an | m carried the sta nly one DSE for ion broadcast or give the result in the value" for the 'For each netwo | ation during the account each station. ver the air during the ac decimals in column 4. station. ork or noncommercial ec in column 6. Round to n | counting period. This figure must ducational station, o less than the | |
| Capacity | | C | ATEGORY I | LAC STATIONS: | COMPUTAT | ION OF DSEs | | |
| | 1. CALL SIGN | 2. NUMBE OF HOU CARRIE SYSTEN | R JRS ED BY | 3. NUMBER OF HOURS STATION ON AIR | 4. BASIS O CARRIAC VALUE | F 5. TYPI | | SE |
| | | | ÷ | | = <u></u> | <u>x</u> | <u>=</u> | |
| | | | | : | | x x | | |
| | | | ÷ | | = | x | = | |
| | | | ÷ | | = | x | = | |
| | | | _ | | = | Y | = = | |
| | | | ÷ | | = | x | = | |
| | Add the DSEs | of CATEGORY LAC Sof each station. Im here and in line 2 of p | | edule, | | 0.0 | 0 | |
| Computation of DSEs for Substitute-Basis Stations | Was carried tions in efferations in efferations in efferations are space I). Column 2: at your option. Column 3: Column 4: | e the call sign of each stand by your system in substant on October 19, 1976 (one or more live, nonnetwork). For each station give the This figure should correst the number of days Divide the figure in column This is the station's DSE | itution for a prog as shown by the ork programs du number of live, spond with the i is in the calendal in 2 by the figur (For more inform | gram that your systen e letter "P" in column ring that optional carr nonnetwork program nformation in space I. r year: 365, except in e in column 3, and gimation on rounding, s | n was permitted 7 of space I); an iage (as shown by s carried in subs a leap year. ve the result in c ee page (viii) of | to delete under FCC rul d v the word "Yes" in colum stitution for programs the olumn 4. Round to no le the general instructions | es and regular- n 2 of at were deleted ess than the third | orm). |
| | | | | BASIS STATION | | | | |
| | 1. CALL SIGN | 2. NUMBER OF PROGRAMS | 3. NUMBE OF DAYS IN YEAR | S | 1. CALL SIGN | 2. NUMBER OF PROGRAMS | 3. NUMBER OF DAYS IN YEAR | 4. DSE |
| | | ÷ | | = | | | ÷ | = |
| | | ÷ | | = | | | ÷ | |
| | | ÷ | | = | | | ÷ | = |
| | | ÷ | | = | | | ÷ | = |
| | Add the DSEs | of SUBSTITUTE-BAS of each station. Im here and in line 3 of p | | edule, | | 0.0 | 0 | - |
| 5 | | ER OF DSEs: Give the am sapplicable to your system | | ooxes in parts 2, 3, and | 4 of this schedul | le and add them to provid | de the tota | |
| Total Number | 1. Number of | f DSEs from part 2● | | | | > | 0.00 | |
| of DSEs | | f DSEs from part 3 ● | | | | > | 0.00 | |
| | 3. Number o | f DSEs from part 4 ● | | | | > | 0.00 | |
| | TOTAL NUMBE | R OF DSEs | | | | | • | 0.00 |

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/1

| MCC lowa, LL | | | | | | | S' | YSTEM ID# 035174 | Name |
|--|---|--|--|---|--|--|-----------------------|---------------------|--|
| Instructions: Bloc In block A: • If your answer if | | | part 6 and part | 7 of the DSE sche | edule blank a | nd complete pa | art 8, (page 16) of | the | 6 |
| schedule. • If your answer if | "No " complete blo | ocks B and C | below | | | | | | |
| your anower | , | | | ELEVISION M. | ARKETS | | | | Computation of |
| | 1981? | schedule—[| • | iller markets as de | | | | gulations in | 3.75 Fee |
| | | BI OC | CK B: CARR | IAGE OF PERI | MITTED DS | SEs | | | |
| Column 1: CALL SIGN | under FCC rules | s of distant st and regulatione DSE Sche | ations listed in ons prior to Jui dule. (Note: TI | part 2, 3, and 4 or ne 25, 1981. For fune letter M below r | f this schedule urther explana | e that your sys | ed stations, see the | he | |
| Column 2: BASIS OF PERMITTED CARRIAGE | (Note the FCC rd A Stations carri 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfatherec instructions fc E Carried pursu *F A station pre | ules and reguled pursuant to as defined to all educations of the station (76. or DSE schedant to individuationally carried JHF station was and to station was a station wa | lations cited be to the FCC mand in 76.5(kk) (7 all station [76.565) (see paragulule). Lual waiver of Fed on a part-ting grade-Berthin grade-B | ne or substitute ba contour, [76.59(d)(| ose in effect of 76.57, 76.59(b e)(1), 76.63(a 63(a) referring bstitution of g | n June 24, 198 i), 76.61(b)(c), ii) referring to 7 g to 76.61(d) irandfathered s | 76.63(a) referring | | |
| Column 3: | | e stations ide | ntified by the I | n parts 2, 3, and 4 etter "F" in column | | | vorksheet on page | e 14 of | |
| 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | |
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| | | 1 | | | | 1 | | 0.00 | |
| | | В | LOCK C: CO | MPUTATION OF | F 3.75 FEE | | | | |
| | | | | | | | | | |
| Line 1: Enter the Line 2: Enter the | | | | | | | | <u> </u> | |
| Line 3: Subtract | · | | | | t to the 3.75 | rate. | - | | |
| (If zero, I | eave lines 4-7 b | olank and pr | oceed to part | 7 of this schedu | | | | 0.00 | Do any of the |
| Line 4: Enter gro | ess receipts from | ı space K (p | age 7) | | | | x 0.03 | 375 | DSEs represent partially permited/ |
| Line 5: Multiply li | ine 4 by 0.0375 | and enter si | ım here | | | | x | | partially nonpermitted |
| Line 6: Enter tota | al number of DS | Es from line | 3 | | | | - | | carriage? If yes, see part 9 instructions. |
| Line 7: Multiply li | ine 6 by line 5 aı | nd enter her | e and on line | 2, block 3, spac | e L (page 7) | | | 0.00 | |

| C Iowa, I | LLC (Ottumwa, I | A) | | | | | | 035174 | Name |
|-----------------|--------------------|---|-----------------|--------------------|-----------|-----------------|--------------------|--------|-------------------------|
| | | BLOCK | | SION MARKETS | S (CONTIN | | T | | _ |
| 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 6 |
| | | | | | | | | | Computation of 3.75 Fee |
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| Name | MCC lowa, LLC | | | | | | | | | | S | 4935174 035174 | |
|--|--|--|--|---|---|---|---|--|---|--|--------------------------------|-------------------|-----|
| Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage | A—Part-time sp 76.59(B—Late-night pr 76.61(S—Substitute ca genera Column 5: Indicate Column 6: Compan | or to June 25, call sign for eat the DSE for the DSE for the basis of CCC rules and ecialty progra (d)(1),76.61(e rogramming: ((e)(3)). arriage under all instructions the station's Ie the DSE figures B, column 3 of information you | 1981, under ach distant shis station for geriod and arriage on vergulations mming: Carriage under a certain FCC in the pape DSE for the ures listed ir of part 6 for bu give in co | r former station icor a sing d year ir which the cited be riage, or 3 (referreder FCC) rules, rer SA3 focurrent in column this stat | FCC rules go dentifed by the gle accounting in which the cale station was to allow pertain to on a part-time bring to 76.61(e) rules, section regulations, or orm. accounting pens 2 and 5 and | ver let pe rria carri tho assi)(1 au | rnin tter rioc age riec ose is, ())). 76.5 utho d as t th | g part-time and sub "F" in column 2 of part, occurring between and DSE occurred by listing one of the in effect on June 24 of specialty program 59(d)(3), 76.61(e)(3) rizations. For furthes computed in parts he smaller of the two | stitute carri part 6 of the n January 1 (e.g., 1981) e following 4, 1981. nming unde n, or 76.63 (or explanation 2, 3, and 4 of figures he | age. DSE schedule, 1978 and Jur 1) letters r FCC rules, se referring to on, see page (v of this schedule. This figure | ections or of the leshould be | 981 ne entered | |
| | | 1 | | OR STA | TIONS CARRI | ED | 0 | N A PART-TIME AN | ID SUBSTI | TUTE BASIS | | | |
| | 1. CALL SIGN | 2. PRIC | | | OUNTING ERIOD | | | 4. BASIS OF CARRIAGE | | RESENT DSE | 6. P | ERMITTED DSE | |
| | 3.3.1 | | | | | | | | | | | | T |
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| 7 Computation of the | Instructions: Block A In block A: If your answer is If your answer is | "Yes," comple | ete blocks B locks B and | C blank | and complete | | | 8 of the DSE sched | | , | | | |
| Syndicated | | | | BLOCK | (A: MAJOR | . 11 | <u>EL</u> | EVISION MARK | <u>EI</u> | | | | |
| Exclusivity Surcharge | Is any portion of the or | cable system v | vithin a top 1 | 00 majo | r television ma | rke | et as | s defned by section 7 | 6.5 of FCC | rules in effect J | une 24, | 1981? | |
| , and the second | Yes—Complete | • | | , | | | _ | X No—Proceed to | | | ŕ | | |
| | 51.001/5.0 | | | | 0 | \exists | | B) 0.01 | | | | | _ |
| | | arriage of VHI | | | | \dashv | - | | | tation of Exem | - | | |
| | Is any station listed in commercial VHF stati or in part, over the ca | ion that places | • | • | | | nit | as any station listed y served by the cab former FCC rule 76 | le system p | | | | |
| | Yes—List each s | tation below wi | th its appropr | iate pern | nitted DSE | | | Yes—List each st | ation below | with its appropria | ate permi | tted DSE | |
| | X No—Enter zero a | and proceed to | part 8. | | | | | X No—Enter zero a | nd proceed t | o part 8. | | | |
| | CALL SIGN | DSE | CALL S | IGN | DSE | | | CALL SIGN | DSE | CALL SIG | N | DSE | |
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| | | <u> </u> | TOTAL D | OSEs | 0.00 | | | | <u> </u> | TOTAL DS | Es | 0.00 | |
| | | | | | | - | | | | | | | |

| LEGAL NA | ME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# | Name |
|---------------|--|--------------|---------------------------|
| | MCC Iowa, LLC (Ottumwa, IA) | 035174 | |
| | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE | | |
| Section 1 | Enter the amount of gross receipts from space K (page 7) | 1,115,412.78 | 7 |
| Section 2 | A. Enter the total DSEs from block B of part 7 | 0.00 | Computation of the |
| | B. Enter the total number of exempt DSEs from block C of part 7 | 0.00 | Syndicated Exclusivity |
| | C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8. | 0.00 | Surcharge |
| • Is an | y portion of the cable system within a top 50 television market as defned by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below. | | |
| | SECTION 3: TOP 50 TELEVISION MARKET | | |
| Section 3a | Did your cable system retransmit the signals of any partially distant television stations during the accounting period? 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 D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. | SE | |
| | A. Enter 0.00599 of gross receipts (the amount in section1) | | |
| | B. Enter 0.00377 of gross receipts (the amount in section.1) | | |
| | C. Subtract 1.000 from total permitted DSEs (the figure on | | |
| | line C in section 2) and enter here | _ | |
| | D. Multiply line B by line C and enter here | | |
| | E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | | |
| Section 3b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank. | | |
| 0.5 | 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 | | |
| | Synthicated Exclusivity Surcharge | | |
| | SECTION 4: SECOND 50 TELEVISION MARKET | | |
| Section 4a | Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Television stations during the accounting period? X 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 | | |

| Name | | | TEM ID# |
|---|--|--|-----------|
| | ı | MCC Iowa, LLC (Ottumwa, IA) | 035174 |
| 7 | Section 4b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. | |
| Computation | | A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ _\$ | |
| of the Syndicated | | B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$ | |
| Exclusivity Surcharge | | C. Multiply line B by 3.000 and enter here | |
| | | D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$ | |
| | | E. Subtract 4.000 from the total DSEs (the figure on line C in | |
| | | section 2) and enter here | |
| | | F. Multiply line D by line E and enter here | |
| | | G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) | |
| | | Syndicated Exclusivity Surcharge | <u></u> . |
| 8 Computation of Base Rate Fee | You me 6 was 6 In blo If you If you blank What i | ctions: nust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. our answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. our answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below to. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions. | |
| | | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS | |
| | • Did v | your cable system retransmit the signals of any partially distant television stations during the accounting period? | |
| | | Yes—Complete part 9 of this schedule. X No—Complete the following sections. | |
| | | BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE | |
| | Section 1 | Enter the amount of gross receipts from space K (page 7) ▶ _ \$ 1,115,412.78 | |
| | 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 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts | |
| | | (the amount in section 1) | |
| | | B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ _ \$ 7,819.04 | |
| | | C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here | |
| | | D. Multiply line B by line C and enter here | |
| | | E. Add lines A, and D. This is your base rate fee. Enter here | |
| | | and in block 3, line 1, space L (page 7) Base Rate Fee | <u> </u> |
| | | | |

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/1

| LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ottumwa, IA) | SYSTEM ID# 035174 | Nama |
|--|---|---|
| Section If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 | blank. | |
| A. Enter 0.01064 of gross receipts (the amount in section 1) ▶\$ | | 8 |
| B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$ | | Computation of Base Rate Fee |
| C. Multiply line B by 3.000 and enter here ▶\$ | | Buse rate ree |
| 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 | <u> </u> | |
| G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee | ▶ \$ 0.00 | |
| IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carr instead be reported on a community-by-community basis (subscriber groups) if the cable system Space G. | | 9 |
| In General: If any of the stations you carried were partially distant, the statute allows you, in conreceipts from subscribers located within the station's local service area, from your system's total exclusion, you must: | | Computation of Base Rate Fee |
| First: Divide all of your subscribers into subscriber groups, each group consisting entirely of substation or the same group of stations. Next: Treat each subscriber group as if it were a separate DSEs and the portion of your system's gross receipts attributable to that group, and calculate a Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate | cable system. Determine the number of separate base rate fee for each group. | and Syndicated Exclusivity Surcharge |
| NOTE: If any portion of your cable system is located within the top 100 television market and the also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complifyour cable system is wholly located outside all major television markets, complete block A only | e station is not exempt in part 7, you must lete both block A and B below. However, | for Partially Distant Stations, and |
| How to Identify a Subscriber Group for Partially Distant Stations Step 1: For each community served, determine the local service area of each wholly distant and | l each nartially distant station you | for Partially Permitted |
| carried to that community. | | Stations |
| Step 2: For each wholly distant and each partially distant station you carried, determine which o outside the station's local service area. A subscriber located outside the local service area of a sthe same token, the station is distant to the subscriber.) | | |
| Step 3: Divide your subscribers into subscriber groups according to the complement of stations subscriber group must consist entirely of subscribers who are distant to exactly the same complesystem will have only one subscriber group when the distant stations it carried have local services. | ement of stations. Note that a cable | |
| Computing the base rate fee for each subscriber group: Block A contains separate sections groups. In each section: | , one for each of your system's subscriber | |
| • Identify the communities/areas represented by each subscriber group. | | |
| Give the call sign for each of the stations in the subscriber group's complement—that is, each subscribers in the group. If: | station that is distant to all of the | |
| If: 1) your system is located wholly outside all major and smaller television markets, give each stati and 4 of this schedule; or, | ion's DSE as you gave it in parts 2, 3, | |
| 2) any portion of your system is located in a major or smaller televison market, give each station part 6 of this schedule. | 's DSE as you gave it in block B, | |
| Add the DSEs for each station. This gives you the total DSEs for the particular subscriber grou | p. | |
| • Calculate gross receipts for the subscriber group. For further explanation of gross receipts see in the paper SA3 form. | page (vii) of the general instructions | |
| Compute a base rate fee for each subscriber group using the formula outline in block B of part page. In making this computation, use the DSE and gross receipts figure applicable to the partic DSEs for that group's complement of stations and total gross receipts from the subscribers in the | cular subscriber group (that is, the total | |

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

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 035174 MCC Iowa, LLC (Ottumwa, IA) Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

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| Base Rate Fee: Add the Enter here and in block | | | criber group | as shown in the boxes | above. | \$ | 0.00 | |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ottumwa, IA) SYSTEM ID# 035174 | | | | | | | | |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ottumwa, IA) 035174 | | | | | | | | | |
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| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ottumwa, IA) SYSTEM ID# 035174 | | | | | | | | | |
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| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ottumwa, IA) SYSTEM ID# 035174 | | | | | | | | | |
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FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MCC Iowa, LLC (Ottumwa, IA) 035174 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MCC Iowa, LLC (Ottumwa, IA) 035174 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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| CK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP |
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| \$ 0.00 Gross Receipts Fourth Group \$ 0.00 |

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ottumwa, IA) 035174 | | | | | | | | |
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| | | BER GROUP | SUBSCRI | TE FEES FOR EACH | BASE RA | COMPUTATION OF | OCK A: C | BL | |
| 0 | JP | TWENTY-SECOND SUBSCRIBER GROUP | | | | SUBSCRIBER GROU | ΓY-FIRST | TWENT | |
| 9 Computation | COMMUNITY/ AREA 0 | | | | 0 | | | COMMUNITY/ AREA | |
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| EGAL NAME OF OWNER OF CABLE SYSTEM: ICC Iowa, LLC (Ottumwa, IA) O35174 | | | | | | | | |
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| TWENTY-FIFTH S | SUBSCRIBER GROUP | ATE FEES FOR EACH SUBSCRIBER GROUP TWENTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 | | | | 9 | | |
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| ate Fee First Group | \$ 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 | | | |
| TWENTY-SEVENTH S | SUBSCRIBER GROUP | TWFN | TY-FIGHTH | SUBSCRIBER GROU | IP | | | |
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| ate Fee Third Group | \$ 0.00 | Base Rate Fee Fourt | h Group | \$ | 0.00 | | | |
| Receipts Third Group | \$ 0.00 \$ 0.00 | Gross Receipts Fourt Base Rate Fee Fourt | h Group | \$ \$ | 0.00 | | | |

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| THIRTY-FIRST SUBSCRIBER GROUP THIRTY-SECOND SUBSCRIBER GROUP | ND SUBS | /-SECOI | THIRT | JP | SUBSCRIBER GROU | TY-FIRST | THIR |
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| nird Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 | \$ | Group | Rate Fee Four | 0.00 | \$ | roup | Base Rate Fee Third (|

| LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Ottumwa, IA) SYSTEM ID# 035174 | | | | | | | | |
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| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Fourt | th Group | \$ | 0.00 | |
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| Gross Receipts First Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
| Base Rate Fee First Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
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| Gross Receipts Third Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | |
| ase Rate Fee Third Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |

| MCC lowa, LLC (| | | | | | S | YSTEM ID# 035174 | Name |
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| LEGAL NAME OF OWN MCC lowa, LLC (| | | | | | S | YSTEM ID# 035174 | Name |
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| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
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| LEGAL NAME OF OWNE MCC lowa, LLC (O | | | | | | S | YSTEM ID# 035174 | Name |
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| BL | OCK A: (| COMPUTATION OF | BASE RA | TE FEES FOR EACH | H SUBSCR | RIBER GROUP | | |
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| LEGAL NAME OF OWN MCC lowa, LLC (| | | | | | S | YSTEM ID# 035174 | Name |
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| | | COMPUTATION C SUBSCRIBER GRO | | TE FEES FOR EAC | | IBER GROUP SUBSCRIBER GROU | JP | 0 |
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| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
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| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | scriber group | as shown in the boxe | es above. | \$ | | |

| Name | 935174 035174 | J | | | | LE SYSTEM: IA) | | MCC Iowa, LLC (C |
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| | | IBER GROUP | SUBSCR | TE FEES FOR EACH | BASE RA | COMPUTATION O | BLOCK A: (| В |
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| MCC lowa, LLC (O | | | | | | SY | STEM ID# 035174 | Name |
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| LEGAL NAME OF OWNER MCC lowa, LLC (O | | | | | | S | YSTEM ID# 035174 | Name |
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| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
| | TY-FIRST | SUBSCRIBER GROU | JP | SEVENT | Y-SECOND | SUBSCRIBER GROU | JP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Base Rate Fee: Add the Enter here and in block | | | riber group | as shown in the boxes | above. | \$ | | |

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| В | LOCK A: (| COMPUTATION OF | BASE RA | TE FEES FOR EAC | H SUBSCR | IBER GROUP | | |
| | TY-THIRD | SUBSCRIBER GRO | | li | | SUBSCRIBER GROU | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | Α | | 0 | Computation |
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| 07.122.0.0.1 | 202 | 07.22 0.0.1 | 202 | 07.22 0.011 | 202 | 07.122.01.01.1 | 302 | Base Rate Fee |
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| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP NTY-SEVENTH SUBSCRIBER GROUP REA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate and Syndicat Exclusive |
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| hird Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 |

| MCC lowa, LLC | | | | | | S | YSTEM ID# 035174 | Name |
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| | | SUBSCRIBER GRO | | 11 | | SUBSCRIBER GROU | | 9 |
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| Base Rate Fee Third | l Group | \$ | 0.00 | Base Rate Fee Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | criber group | as shown in the boxes | above. | \$ | | |

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| Base Rate Fee First Group \$ 0.00 Base Rate Fee Sec | cond Group | \$ | 0.00 | |
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| Base Rate Fee Third Group \$ 0.00 Base Rate Fee For | urth Group | \$ | 0.00 | |

| MCC lowa, LLC | | | | | | S | YSTEM ID# 035174 | Name |
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| COMMUNITY AREA | ······································ | | | COMMUNITY/ AREA | | | | Computation |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Secon | nd Group | \$ | 0.00 | |
| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
| | | SUBSCRIBER GRO | | III | | SUBSCRIBER GROU | JP | |
| COMMUNITY/ AREA | 4 | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | _1 | | 0.00 | |
| Gross Receipts Third | d Group | \$ | 0.00 | Gross Receipts Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee Third | d Group | \$ | 0.00 | Base Rate Fee Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | criber group | as shown in the boxes | above. | \$ | | |

| | | (A) | | | | | 035174 |
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| | | | | ATE FEES FOR EAC | | | ID |
| NINETY-TH COMMUNITY/ AREA | אט S | SUBSCRIBER GROU | <u>JP</u> | NINE COMMUNITY/ AREA | | SUBSCRIBER GROU | JP 0 |
| | | | | OOMMONT IT AREA | | | |
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| otal DSEs | | | 0.00 | Total DSEs | | | 0.00 |
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| ross Receipts First Group | - | \$ | 0.00 | Gross Receipts Seco | na Group | \$ | 0.00 |
| ase Rate Fee First Group | ; | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 |
| NINETY-FI | TH S | SUBSCRIBER GROU | JP | NIN | IETY-SIXTH | SUBSCRIBER GROU | JP |
| OMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 |
| 0411 01011 100 | | | | | | | |
| CALL SIGN DS | Ξ] | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
| CALL SIGN DS | Ξ | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
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| CALL SIGN DS | Ξ | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
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| CALL SIGN DS | | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
| | | CALL SIGN | 0.00 | Total DSEs | DSE | CALL SIGN | DSE |
| otal DSEs | _ | | 0.00 | Total DSEs | | | 0.00 |
| otal DSEs | _ | CALL SIGN | | | | CALL SIGN | |
| otal DSEs Gross Receipts Third Group | | | 0.00 | Total DSEs | h Group | | 0.00 |

| MCC lowa, LLC (C | | | | | | S | YSTEM ID# 035174 | Name |
|------------------------|----------|-----------------|--------------|-----------------------|--|--|---------------------|---------------------------|
| | | | | ATE FEES FOR EACH | SUBSCR | RIBER GROUP | | |
| | SEVENTH | SUBSCRIBER GROU | | TT . | TY-EIGHTH | SUBSCRIBER GROU | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee |
| | | | | | | | | and |
| | | - | | | <u></u> | | | Syndicated Exclusivity |
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| Total DSEs | <u> </u> | | 0.00 | Total DSEs | | !! | 0.00 | |
| Gross Receipts First G | Froun | \$ | 0.00 | Gross Receipts Secon | nd Group | \$ | 0.00 | |
| Groot Resolpto Filot C | лоцр | | | Cross rescripto escol | и огоир | | | |
| Base Rate Fee First G | Group | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
| | TY-NINTH | SUBSCRIBER GROU | | III | JNDREDTH | SUBSCRIBER GROU | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Fourth | n Group | \$ | 0.00 | |
| Base Rate Fee Third (| Group | \$ | 0.00 | Base Rate Fee Fourth | n Group | \$ | 0.00 | |
| Base Rate Fee: Add to | | | criber group | as shown in the boxes | above. | \$ | | |

| LEGAL NAME OF OWNE MCC lowa, LLC (C | | | | | | S | YSTEM ID# 035174 | Name |
|--|----------|----------------|--------------|-----------------------|-----------|-----------------|---------------------|----------------------|
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| ONE HUNDRI COMMUNITY/ AREA | ED FIRST | SUBSCRIBER GRO | UP 0 | ONE HUNDRI | | SUBSCRIBER GROU | UP 0 | 9 |
| COMMONT IT AREA | | | | COMMONT IT AREA | | | | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
| ONE HUNDRE | ED THIRD | SUBSCRIBER GRO | UP | ONE HUNDR | ED FOURTH | SUBSCRIBER GROU | UP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | Group | \$ | 0.00 | Gross Receipts Four | th Group | \$ | 0.00 | |
| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Four | th Group | \$ | 0.00 | |
| Base Rate Fee: Add the Enter here and in block | | | criber group | as shown in the boxes | s above. | \$ | | |

| EGAL NAME OF OWNER OF CABLE SYSTEM: MCC lowa, LLC (Ottumwa, IA) SYSTEM ID# 035174 | | | | | | | | Name |
|---|--------------------|-----------------------|-------------|--------------------|------------|------------------|------|---------------------------|
| В | LOCK A: (| COMPUTATION O | F BASE RA | ATE FEES FOR EAC | CH SUBSCF | RIBER GROUP | | |
| ONE HUNDF | RED FIFTH | SUBSCRIBER GRO | UP | ONE HUN | DRED SIXTH | I SUBSCRIBER GRO | JP | 0 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | Α | | 0 | 9 Computatio |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| | | | <u></u> | | | | | and |
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| Total DSEs | | | 0.00 | Total DSEs | | - | 0.00 | |
| Gross Receipts First C | Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
| Base Rate Fee First G | Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
| ONE HUNDRED | SEVENTH | SUBSCRIBER GRO |)UP | ONE HUND | RED EIGHTH | I SUBSCRIBER GRO | JP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | Α | | 0 | |
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| Total DSEs | | | 0.00 | Total DSEs | | II | 0.00 | |
| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | |
| • | - | | | | • | | | |
| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee: Add t | he base rat | te fees for each subs | | | | \$ | 0.00 | |

| LEGAL NAME OF OWN MCC lowa, LLC (| | | | | | S | YSTEM ID# 035174 | Name |
|--|------------|----------------|--------------|-----------------------|-----------|-----------------|---------------------|---------------------|
| | | | | TE FEES FOR EAC | | | ID. | |
| ONE HUNDR | ED NIN I H | SUBSCRIBER GRO | UP 0 | COMMUNITY/ AREA | | SUBSCRIBER GROU | UP 0 | 9 |
| | | | | 041.004 | T 505 | II oall olon | | Computation |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First (| Group | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
| Base Rate Fee First 0 | Group | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
| ONE HUNDRED E | LEVENTH | SUBSCRIBER GRO | JP | ONE HUNDRE | D TWELVTH | SUBSCRIBER GROU | UP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | Α | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Four | th Group | \$ | 0.00 | |
| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Four | th Group | \$ | 0.00 | |
| Base Rate Fee: Add t Enter here and in bloo | | | criber group | as shown in the boxes | s above. | \$ | | |

| MCC Iowa, LLC (C | | | | | | S | YSTEM ID# 035174 | Name |
|--|-------------|-----------------|-------------|-----------------------|-----------|-----------------|---------------------|------------------|
| В | LOCK A: (| COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | RIBER GROUP | | |
| ONE HUNDRED THI | RTEENTH | SUBSCRIBER GROL | | III | JRTEENTH | SUBSCRIBER GROU | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | _ |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | Computation of |
| OF ILL GIGIT | 502 | O/ILL GIGIT | 502 | O/ILL GIGIT | DOL | O/ILL GIGIT | 502 | Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | Group | \$ | 0.00 | Gross Receipts Secon | nd Group | \$ | 0.00 | |
| Base Rate Fee First G | Group | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
| ONE HUNDRED FI | IFTEENTH | SUBSCRIBER GROU | JP | ONE HUNDRED S | SIXTEENTH | SUBSCRIBER GROU | JP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Gross Receipts Third (| Group | \$ | 0.00 | Gross Receipts Fourth | n Group | \$ | 0.00 | |
| Base Rate Fee Third (| Group | \$ | 0.00 | Base Rate Fee Fourth | n Group | \$ | 0.00 | |
| Base Rate Fee: Add the Enter here and in block | | | riber group | as shown in the boxes | above. | \$ | | |

| MCC lowa, LLC | | | | | | S | YSTEM ID# 035174 | Name |
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| | BLOCK A: (| COMPUTATION OF | BASE RA | ATE FEES FOR EACH | I SUBSCF | RIBER GROUP | | |
| ONE HUNDRED SEV | | SUBSCRIBER GRO | | II | SHTEENTH | SUBSCRIBER GROU | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Total DSEs | | | 0.00 | Total DSEs | | !! | 0.00 | |
| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Secon | nd Group | \$ | 0.00 | |
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| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
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| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Gross Receipts Third | l Group | \$ | 0.00 | Gross Receipts Fourth | n Group | \$ | 0.00 | |
| Base Rate Fee Third | l Group | \$ | 0.00 | Base Rate Fee Fourth | n Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | criber group | as shown in the boxes | above. | \$ | | |

| MCC lowa, LLC (| | | | | | S | YSTEM ID# 035174 | Name |
|---|------------|------------------|--------------|-----------------------|----------------|------------------|---------------------|----------------------|
| [| BLOCK A: (| COMPUTATION O | BASE RA | ATE FEES FOR EAC | H SUBSCF | RIBER GROUP | | |
| ONE HUNDRED TW | ENTY-FIRST | SUBSCRIBER GRO | UP | ONE HUNDRED TWE | NTY-SECONE | SUBSCRIBER GROUP | , | • |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | ٩ | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Total DSEs | | <u> </u> | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Seco | and Group | \$ | 0.00 | |
| erece receipte r net | O.04P | <u>*</u> | | | она оноар | | | |
| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
| ONE HUNDRED TWE | NTY-THIRD | SUBSCRIBER GROUP | • | ONE HUNDRED TWE | NTY-FOURTH | SUBSCRIBER GROUP | , | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | Α | | 0 | |
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| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Four | rth Group | \$ | 0.00 | |
| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Four | th Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | criber group | as shown in the boxes | s above. | \$ | | |

| MCC lowa, LLC | | | | | | S | YSTEM ID# 035174 | Name |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Secon | nd Group | \$ | 0.00 | |
| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
| NE HUNDRED TWENT | TY-SEVENTH | SUBSCRIBER GROUF |) | ONE HUNDRED TWE | NTY-EIGHTH | SUBSCRIBER GROUP |) | |
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| Total DSEs | | | 0.00 | Total DSEs | | 11 | 0.00 | |
| Gross Receipts Third | d Group | \$ | 0.00 | Gross Receipts Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee Third | d Group | \$ | 0.00 | Base Rate Fee Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | criber group | as shown in the boxes | above. | \$ | | |

| LEGAL NAME OF OWNE MCC lowa, LLC (O | | | | | | S | YSTEM ID# 035174 | Name |
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| BL | OCK A: (| COMPUTATION OF | BASE RA | TE FEES FOR EAC | H SUBSCR | IBER GROUP | | |
| ONE HUNDRED TWEN | ITY-NINTH | SUBSCRIBER GROUP | | ONE HUNDRE | D THIRTIETH | SUBSCRIBER GROUP |) | 0 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | A | | 0 | 9 Computation |
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| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
| ONE HUNDRED THIS | RTY-FIRST | SUBSCRIBER GROUP | | ONE HUNDRED THI | RTY-SECOND | SUBSCRIBER GROUP |) | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | Group | \$ | 0.00 | Gross Receipts Four | th Group | \$ | 0.00 | |
| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Four | th Group | \$ | 0.00 | |
| Base Rate Fee: Add th Enter here and in block | | | riber group | as shown in the boxe | s above. | \$ | | |

| MCC lowa, LLC (| | | | | | S | YSTEM ID# 035174 | Name |
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| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | |
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| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | criber group | as shown in the boxes | above. | \$ | | |

| LEGAL NAME OF OW MCC lowa, LLC | | | | | | S | YSTEM ID# 035174 | Name |
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| _ | BLOCK A: (| COMPUTATION C | F BASE RA | TE FEES FOR EAC | CH SUBSCR | RIBER GROUP | | |
| ONE HUNDRED THIR | TY-SEVENTH | SUBSCRIBER GROU | IP | ONE HUNDRED TH | HIRTY-EIGHTH | I SUBSCRIBER GROUP |) | 0 |
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| Base Rate Fee First | | \$ | 0.00 | Base Rate Fee Sec | | \$ | 0.00 | |
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| LEGAL NAME OF OWNE | | | | | | S | YSTEM ID# 035174 | Name |
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| Bl | _OCK_A: (| COMPUTATION OF | BASE RA | TE FEES FOR EAC | H SUBSCR | IBER GROUP | | |
| ONE HUNDRED FOR | RTY-FIRST | SUBSCRIBER GROUP | | ONE HUNDRED FOI | RTY-SECOND | SUBSCRIBER GROUP |) | 0 |
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| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
| ONE HUNDRED FOR | RTY-THIRD | SUBSCRIBER GROUP | | ONE HUNDRED FO | RTY-FOURTH | SUBSCRIBER GROUP |) | |
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| Base Rate Fee: Add th Enter here and in block | | | riber group | as shown in the boxes | s above. | \$ | | |

| LEGAL NAME OF OWNE MCC lowa, LLC (C | | | | | | S | YSTEM ID# 035174 | Name |
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| В | LOCK A: (| COMPUTATION OF | BASE RA | TE FEES FOR EAC | H SUBSCR | IBER GROUP | | |
| ONE HUNDRED FO | RTY-FIFTH | SUBSCRIBER GROUP | | ONE HUNDRED F | FORTY-SIXTH | SUBSCRIBER GROUP |) | 0 |
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| Gross Receipts First G | iroup | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Seco | and Group | \$ | 0.00 | |
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| Base Rate Fee Third C | Group | \$ | 0.00 | Base Rate Fee Four | th Group | \$ | 0.00 | |
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| LEGAL NAME OF OWN MCC lowa, LLC (| | | | | | S | YSTEM ID# 035174 | Name |
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| | BLOCK A: | COMPUTATION O | F BASE RA | TE FEES FOR EAC | CH SUBSCR | RIBER GROUP | | |
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| LEGAL NAME OF OWN MCC lowa, LLC (| | | | | | S | YSTEM ID# 035174 | Name |
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| LEGAL NAME OF OWNE | | | | | | S | YSTEM ID# 035174 | Name |
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| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
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| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Fourth | n Group | \$ | 0.00 | |
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| Base Rate Fee: Add the Enter here and in block | | | riber group | as shown in the boxes | above. | \$ | | |

| LEGAL NAME OF OWN MCC lowa, LLC (| | | | | | S | 035174 | Name |
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| | | | | | | | | Base Rate Fe |
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| | <u></u> | | | | | | | Syndicated Exclusivity |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | 1 |
| Gross Receipts First (| Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
| . | | | 2.22 | | | | 0.00 | |
| Base Rate Fee First (| | \$ | 0.00 | Base Rate Fee Sec | | \$ | 0.00 | |
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| COMMUNITY/ AREA | | | | COMMUNITY/ ARE | ٩ | | | |
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| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | |
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| | - · M | Ţ | 3.30 | | o u p | ļ * | 5.55 | |
| Base Rate Fee: Add t | | | scriber group | as shown in the boxe | s above. | \$ | | |

| 9 Computation | YSTEM ID# 035174 | | | | | | | LEGAL NAME OF OWNE |
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| MCC Iowa, LLC (O | | LE SYSTEM: | | | | S | 035174 | Name |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
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| TWENT | Y-THIRD | SUBSCRIBER GRO | UP | TWENT | Y-FOURTH | SUBSCRIBER GRO | UP | |
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| | YSTEM ID# 035174 | | | | | IA) | Ottumwa, | MCC lowa, LLC (C |
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| Name | YSTEM ID# 035174 | | | | | | | MCC lowa, LLC (C |
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| | JP 0 | SUBSCRIBER GROU | Y-EIGHTH | SIX* | JP 0 | SUBSCRIBER GROU | -SEVENTH | SIXTY- |
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| | JP 0 | SUBSCRIBER GROU | Y-EIGHTH | SIX* | JP 0 | SUBSCRIBER GROU | -SEVENTH | SIXTY- |
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| | JP 0 | SUBSCRIBER GROU | Y-EIGHTH | SIX* | JP 0 | SUBSCRIBER GROU | -SEVENTH | COMMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | Y-EIGHTH | SIX* | JP 0 | SUBSCRIBER GROU | -SEVENTH | SIXTY- |
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| | DSE O.00 | SUBSCRIBER GROU | Y-EIGHTH DSE | CALL SIGN CALL SIGN Total DSEs | DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE | CALL SIGN | -SEVENTH DSE | SIXTY-COMMUNITY/ AREA CALL SIGN Total DSEs |
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| otal DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Seco | and Group | \$ | 0.00 | |
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| Total DSEs | | <u> </u> | 0.00 | Total DSEs | | 11 | 0.00 | |
| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
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| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
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| | DSE | CALL SIGN | DSE | Total DSEs | DSE | CALL SIGN | DSE | |
| Total DSEs | | CALL SIGN | | | | CALL SIGN | | |
| Total DSEs Gross Receipts Third | d Group | | 0.00 | Total DSEs Gross Receipts Fou | th Group | | 0.00 | |
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| Gross Receipts First Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
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| Base Rate Fee Third Gi | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add the | e base rat | e fees for each subsc | riber group | as shown in the boxes a | above. | | | |

| LEGAL NAME OF OWNER MCC lowa, LLC (Ot | | | | | | S | 035174 | Name |
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| ONE HUNDRED TWENT | TY-FIRST | SUBSCRIBER GROU | IP | ONE HUNDRED TWE | NTY-SECONE | SUBSCRIBER GROUP | • | 0 |
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| 9 | | SUBSCRIBER GROUP | NTY-SIXTH | | | SUBSCRIBER GROUP | ITY-FIFTH | ONE HUNDRED TWEN |
| Computation | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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FORM SA3E. PAGE 20.

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| Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commer this schedule. 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 the step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the formal step 4: Compute the surcharge for each subscriber group using the formal step 4: Compute the surcharge for each subscriber group using the formal step 4: Compute the surcharge for each subscriber group using the formal step 4: Compute the surcharge for each subscriber group using the formal step 4: Compute the surcharge for each subscriber group for comment the subscriber group for comment for comme | UCTIONS: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show | |
| | ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP | ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs | |
| | SYNDICATED EXCLUSIVITY SURCHARGE First Group | SYNDICATED EXCLUSIVITY SURCHARGE Second Group | |
| | ONE HUNDRED NINTEENTH SUBSCRIBER GROUP | ONE HUNDRED TWENTIETH SUBSCRIBER GROUP | |
| | Line 1: Enter the VHF DSEs Line 2: Enter the Exempt 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 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 | |
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| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page | | |

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