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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED	AMOUNT						
02/23/2021	\$ ALLOCATION NUMBER						

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:									
Accounting Period	2020/2									
B	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 busines 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 covering the entire accounting the covering the interest of the system's first filing. If not, enter the system's ID in	s of the cable system on the last day of the enting period.	m. e accounting period should sub		9221					
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM									
	Midcontinent Communications									
				922	120202					
				9221	2020/2					
	PO Box 5040 Sioux Falls, SD 57117-5040									
	INSTRUCTIONS: In line 1, give any business or trade names used to id	lentify the busines	s and operation of the syste	m unless t	hese					
С	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address giver	n in space	В.					
System	1 Cambridge, MN									
	MAILING ADDRESS OF CABLE SYSTEM: PO Box 5040									
	2 (Number, street, rural route, apartment, or suite number) Sioux Falls, SD 57117-5040 (City, town, state, zip code)									
D	Instructions: For complete space D instructions, see page 1b. Identify	only the fret comm	nunity convod below and rali	ot on nago	1h					
Area	with all communities.	only the fist comin	iunity served below and rein	st on page	ID					
Served	CITY OR TOWN	STATE								
First	Cambridge	MN								
Community	Below is a sample for reporting communities if you report multiple cha	ւ nnel line-ups in Տլ	pace G.							
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	GRP#					
Sample	Alliana	MD	A		1					
	Alliance Gering	MD MD	В		3					
	Coming									

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

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 9221 **Midcontinent Communications** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CH LINE UP SUB GRP# CITY OR TOWN STATE Cambridge MN AA 1 **First Annandale** MN AA 1 Community Avon MN AA 1 **Avon Township** MN AA 1 **Baldwin Township** MN AA 1 **Becker** 1 MN AA See instructions for **Bethel** MN AA 1 additional information on alphabetization. 1 **Bluehill Township** MN AA **Bradford** MN AA 1 1 **Braham** MN AA 1 **Center City** MN AA Add rows as necessary 1 **Chisago City** MN AA 1 Chisago Lake Township MN AA Clear Lake MN AA 1 Clear Lake Township MN AA 1 Clearwater MN AA 1 **Cold Spring** MN AA 1 **Columbus Township** MN AA 1 **Corrinna Township** 1 MN AA **East Bethel** MN AA 1 1 AA **Foley** MN 1 **Forest Lake** MN AA 1 **Foreston** MN AA 1 **Harris** AA MN **Haven Township** MN AA 1 Holdingford 1 MN AA 1 Isanti MN AA 1 Lent MN AA Lindstrom MN AA 1 Linwood MN AA 1 1 Livonia Township MN AA **Marine on St Croix** MN AA 1 1 **May Township** MN AA Milaca MN AA 1 Milaca Township MN AA 1 1

MN

MN

MN

AA

AA

AA

1

1

North Branch

Nessel Township/Rush Lake

Ogilvie	MN	AA	1
Palmer Township	MN	AA	1
Pierz	MN	AA	1
Pine City	MN	AA	1
Pine City Township	MN	AA	1
Pokegama Township	MN	AA	1
Princeton	MN	AA	1
Richmond	MN	AA	1
Rockville	MN	AA	1
Royalton	MN	AA	1
Rush City	MN	AA	1
Scandia Township	MN	AA	1
Shafer	MN	AA	1
St. Augusta Township	MN	AA	1
St. Francis	MN	AA	1
St. Joseph	MN	AA	1
St. Joseph Township	MN	AA	1
St. Stephens	MN	AA	1
St. Wendell	MN	AA	1
Stacy	MN	AA	1
Standford Township	MN	AA	1
Southside Township	MN	AA	1
Taylors Falls	MN	AA	1
Wyoming City	MN	AA	1
Zimmerman	MN	AA	1
Wabasha	M	AB	2
Elgin	M	AB	2
Elgin Township	M	AB	2
Sand Prairie (Greenfield Township)	M	AB	2
Kellogg	M	AB	2
Plainview	M	AB	2
Reads Landing	M	AB	2

Name
Name
Midcontinent Communications

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#
9221

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.

BL	OCK 1	BLOCK 2						
	NO. OF					NO. OF SUBSCRIBERS		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	CATEGORY OF SERVICE	ORY OF SERVICE			RATE
Residential:								
 Service to first set 	19,669	\$	22.95	High Def Converter		19,447	\$	3.00
 Service to additional set(s) 				Hospitals		144	\$	14.00
 FM radio (if separate rate) 				Nursing Homes		651	\$	6.75
Motel, hotel	130	\$	10.00	Business Accounts		521	\$	22.95
Commercial	2,548	\$	72.95					
Converter								
 Residential 	24,892	\$	3.00					
Non-residential								

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 2							
CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE		I	RATE
Continuing Services:			Installation: Non-residential						
Pay cable	\$	16.00	Motel, hotel	\$	50.00	Dig	ital 1	\$	10.00
Pay cable—add'l channel			Commercial	\$	50.00	Dig	ital Variety	\$	3.50
Fire protection			• Pay cable	l		Dig	ital Espanol	\$	4.00
•Burglar protection			Pay cable-add'l channel			Dig	ital Sports & Variety	\$	9.00
Installation: Residential			Fire protection			Cin	emax	\$	16.00
• First set	\$	50.00	Burglar protection	l		Sho	owtime	\$	16.00
Additional set(s)	\$	25.00	Other services:	ļ		Sta	rz! & Encore	\$	16.00
• FM radio (if separate rate)			Reconnect	\$	75.00	TM	С	\$	16.00
Converter			Disconnect	l					
			Outlet relocation	\$	25.00				
			Move to new address	\$	25.00				

LEGAL NAME OF OWN												
					SYSTEM ID#	Name						
Midcontinent C	Communicat	ions			9221							
PRIMARY TRANSMITTI	ERS: TELEVISIO	N										
					and low power television stations)	G						
1	,	•		` '	d only on a part-time basis under ain network programs [sections	_						
76.59(d)(2) and (4), 76	6.61(e)(2) and (4), or 76.63 (r	eferring to 76.61	•	and (2) certain stations carried on a	Primary						
substitute program ba	· •		0 .	carried by your o	able system on a substitute program	Transmitters: Television						
basis under specifc F				carried by your c	able system on a substitute program	relevision						
	•		it in space I (th	e Special Statem	ent and Program Log)—if the							
station was carried • List the station here,	-		tion was carried	l both on a substi	tute basis and also on some other							
		erning substit	ute basis statior	ns, see page (v) o	of the general instructions located							
in the paper SA3 for Column 1: List each		sian. Do not r	eport origination	n program service	es such as HBO, ESPN, etc. Identify							
		-			tion. For example, report multi-							
	A-2". Simulcast	streams must	be reported in o	column 1 (list eac	h stream separately; for example							
WETA-simulcast). Column 2: Give th	e channel numb	per the FCC h	as assigned to t	he television stat	ion for broadcasting over-the-air in							
•	•		annel 4 in Wash	ington, D.C. This	may be different from the channel							
on which your cable s Column 3: Indicate	•		ation is a netwo	rk station. an inde	ependent station, or a noncommercial							
educational station, by	entering the le	tter "N" (for ne	etwork), "N-M" (f	or network multic	ast), "I" (for independent), "I-M"							
(for independent multi For the meaning of the	,, ,		,,	`	ommercial educational multicast).							
			-		es". If not, enter "No". For an ex-							
planation of local serv												
•			-	=	stating the basis on which your tering "LAC" if your cable system							
carried the distant sta		-		•								
					/ payment because it is the subject							
_				•	stem or an association representing ry transmitter, enter the designa-							
					her basis, enter "O." For a further							
Column 6: Give th	e location of ea	, see page (v) ch station. Fo	r U.S. stations, l	ist the community	ed in the paper SA3 form. y to which the station is licensed by the							
				•	which the station is identifed.							
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate :	space G for each	channel line-up.							
		CHANN	EL LINE-UP	AA- Page 1	CHANNEL LINE-UP AA- Page 1							
1. CALL	2. B'CAST	3. TYPE	4 510741170									
SIGN	CHANNEL		4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION]						
		OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION							
	NUMBER	STATION	(Yes or No)	1		-						
KARE-DT	NUMBER 11	STATION N	(Yes or No)	CARRIAGE	MINNEAPOLIS, MN (NBC)	-						
KARE-DT KARE-DT4	NUMBER	STATION	(Yes or No)	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST)	 See instructions for						
	NUMBER 11	STATION N	(Yes or No)	CARRIAGE	MINNEAPOLIS, MN (NBC)	See instructions for additional information						
KARE-DT4	11 11.4	STATION N I-M	(Yes or No) No No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST)	additional information						
KARE-DT4 KARE-DT3	NUMBER 11 11.4 11.3	STATION N I-M	No No No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT	NUMBER 11 11.4 11.3 9	STATION N I-M I-M	(Yes or No) No No No No No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4	11 11.4 11.3 9 9.4	STATION N I-M I-M I-M I	(Yes or No) No No No No No No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT	NUMBER 11 11.4 11.3 9 9.4 16.1 30	STATION N I-M I-M I -M I I - I - I - I - I - I - I - I - I -	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT KSTC-DT3	NUMBER 11 11.4 11.3 9 9.4 16.1 30 30.3	STATION N I-M I-M I-M I-M I-M I-M I-M	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45) MINNEAPOLIS, MN (ME TV)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT KSTC-DT3 KSTC-DT4	NUMBER 11 11.4 11.3 9 9.4 16.1 30 30.3 30.4	I-M I-M I-M I-M I-M I-M I-M I-M I	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN (ANTENNA)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT KSTC-DT3 KSTC-DT4 KSTC-DT6	NUMBER 11 11.4 11.3 9 9.4 16.1 30 30.3 30.4 30.6	STATION N I-M I-M I-M I-M I-M I I-M I-M I-M I-M I	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN (MTENNA) MINNEAPOLIS, MN (THIS TV)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT KSTC-DT3 KSTC-DT4 KSTC-DT6 KSTC-DT6 KSTP-DT	NUMBER 11 11.4 11.3 9 9.4 16.1 30 30.3 30.4 30.6 35	STATION N I-M I-M I-M I-M I-M I I-M I-M I-M I-M I	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN (ANTENNA) MINNEAPOLIS, MN(THIS TV) ST PAUL, MN (ABC)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT KSTC-DT3 KSTC-DT4 KSTC-DT6	NUMBER 11 11.4 11.3 9 9.4 16.1 30 30.3 30.4 30.6	STATION N I-M I-M I-M I-M I-M I I-M I-M I-M I-M I	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN (MTENNA) MINNEAPOLIS, MN (THIS TV)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT KSTC-DT3 KSTC-DT4 KSTC-DT6 KSTC-DT6 KSTP-DT	NUMBER 11 11.4 11.3 9 9.4 16.1 30 30.3 30.4 30.6 35	STATION N I-M I-M I-M I-M I-M I I-M I-M I-M I-M I	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN (ANTENNA) MINNEAPOLIS, MN(THIS TV) ST PAUL, MN (ABC)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT KSTC-DT3 KSTC-DT4 KSTC-DT6 KSTC-DT6 KSTP-DT	NUMBER 11 11.4 11.3 9 9.4 16.1 30 30.3 30.4 30.6 35 35.7	STATION N I-M I-M I-M I-M I I-M I-M I	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN (ANTENNA) MINNEAPOLIS, MN(THIS TV) ST PAUL, MN (ABC) ST PAUL, MN (HEROES)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT KSTC-DT3 KSTC-DT4 KSTC-DT6 KSTP-DT KSTP-DT	NUMBER 11 11.4 11.3 9 9.4 16.1 30 30.3 30.4 30.6 35 35.7	STATION N I-M I-M I-M I-M I I-M I-M I-M I-M I-M I	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN (ANTENNA) MINNEAPOLIS, MN(THIS TV) ST PAUL, MN (ABC) ST PAUL, MN (PBS)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT3 KSTC-DT4 KSTC-DT6 KSTC-DT6 KSTP-DT KSTP-DT7 KTCA-DT4	NUMBER 11 11.4 11.3 9 9.4 16.1 30 30.3 30.4 30.6 35 35.7 34 34.4	STATION N I-M I-M I-M I-M I-M I-M I-M	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN(THIS TV) ST PAUL, MN (ABC) ST PAUL, MN (HEROES) ST PAUL, MN (PBS) ST PAUL, MN (PBS TPT NOW HD) ST PAUL, MN (PBS TPT LIFE)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT KSTC-DT4 KSTC-DT4 KSTC-DT6 KSTC-DT6 KSTP-DT KSTP-DT KTCA-DT KTCA-DT4 KTCI-DT3 KTCI-DT6	NUMBER 11 11.4 11.3 9 9.4 16.1 30 30.3 30.4 30.6 35 35.7 34 34.4 23.3 23.6	STATION N I-M I-M I-M I I I-M I-M I-M I-M E E-M E-M	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN(THIS TV) ST PAUL, MN (ABC) ST PAUL, MN (HEROES) ST PAUL, MN (PBS) ST PAUL, MN (PBS TPT NOW HD) ST PAUL, MN (PBS TPT LIFE) ST PAUL, MN (PBS TPT MN)	additional information						
KARE-DT4 KARE-DT3 KMSP-DT KMSP-DT4 KPXM-DT KSTC-DT3 KSTC-DT4 KSTC-DT4 KSTC-DT6 KSTC-DT6 KSTP-DT KSTP-DT KTCA-DT KTCA-DT4 KTCI-DT3	NUMBER 11 11.4 11.3 9 9.4 16.1 30 30.3 30.4 30.6 35 35.7 34 34.4 23.3	STATION N I-M I-M I-M I-M I-M I-M I-M I-M E E-M E-M	(Yes or No) No	CARRIAGE	MINNEAPOLIS, MN (NBC) MINNEAPOLIS, MN (QUEST) MINNEAPOLIS, MN (True Crime) MINNEAPOLIS, MN (FOX) MINNEAPOLIS, MN (BUZZR) ST CLOUD, MN (ION) MINNEAPOLIS, MN (IND-45) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN (ME TV) MINNEAPOLIS, MN(THIS TV) ST PAUL, MN (ABC) ST PAUL, MN (HEROES) ST PAUL, MN (PBS) ST PAUL, MN (PBS TPT NOW HD) ST PAUL, MN (PBS TPT LIFE)	additional information						

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Midcontinent Communications

SYSTEM ID#
Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

•	•		•	•	•		
		CHANN	EL LINE-UP	AA-Page 2			
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		
WCCO-DT2	32.2	I-M	No		MINNEAPOLIS, MN (StartTV)		
WFTC-DT	29	I	No		MINNEAPOLIS, MN (MNT)		
WFTC-DT4	29.4	I-M	No		MINNEAPOLIS, MN (MOVIES)		
WUCW-DT	22	l	No		MINNEAPOLIS, MN (CW)		
WUCW-DT2	23.2	I-M	No		MINNEAPOLIS, MN (COMET)		
WUCW-DT3	23.3	I-M	No		MINNEAPOLIS, MN (CHARGE)		
WUCW-DT4	23.4	I-M	No		MINNEAPOLIS, MN (TBD TV)		
WCCO-DT3	32.3	I-M	No		Minneapolis, MN (DABL)		
KMSP-DT5	9.5	I-M	No		Minneaplis, MN (The Grio)		
KMSP-DT6	9.6	I-M	No		Minneapolis, MN (Decades)		

G

Primary Transmitters: Television

ſ	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
	Midcontinent Communications	9221	Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AB - Page 1	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	CHANNEL OF		5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KARE-DT	11	N	No		MINNEAPOLIS, MN (NBC)
KARE-DT4	11.4	I-M	No		MINNEAPOLIS, MN (QUEST)
KARE-DT3	11.3	I-M	No		MINNEAPOLIS, MN (True Crime)
KMSP-DT	9	I	No		MINNEAPOLIS, MN (FOX)
KMSP-DT4	9.4	I-M	No		MINNEAPOLIS, MN (BUZZR)
KSTC-DT	30	I	No		MINNEAPOLIS, MN (IND-45)
KSTC-DT3	30.3	I-M	No		MINNEAPOLIS, MN (ME TV)
KSTC-DT4	30.4	I-M	No		MINNEAPOLIS,MN(ANTENNA)
KSTC-DT6	30.6	I-M	No		MINNEAPOLIS, MN(THIS TV)
KSTP-DT	35	N	No		ST PAUL, MN (ABC)
KSTP-DT7	35.7	I-M	No		ST PAUL, MN (HEROES)
KTCA-DT	34	E	No		ST PAUL, MN (PBS)
KTCA-DT4	34.4	E-M	No		ST PAUL ,MN(PBS TPT NOW HD)
KTCI-DT6	23.6	E-M	No		ST PAUL, MN (PBS TPT MN)
KTTC-DT	10	N	No		ROCHESTER, MN (NBC)
WCCO-DT	32	N	No		MINNEAPOLIS, MN (CBS)
WCCO-DT2	32.2	I-M	No		MINNEAPOLIS, MN (StartTV)
WFTC-DT	29	l 1	No		MINNEAPOLIS, MN (MNT)

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Midcontinent Communications

SYSTEM ID#

Name

Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AB - Page 2	
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
WFTC-DT4	29.4	I-M	No		MINNEAPOLIS, MN (MOVIES)
WKBT-DT	8	N	No		LA CROSSE, WI (CBS)
WUCW-DT	22	I	No		MINNEAPOLIS, MN (CW)
WUCW-DT2	23.2	I-M	No		MINNEAPOLIS, MN (COMET)
WUCW-DT3	23.3	I-M	No		MINNEAPOLIS, MN (CHARGE)
WUCW-DT4	23.4	I-M	No		MINNEAPOLIS, MN (TBD TV)
KTCA-DT3	34.3	E-M	No		ST PAUL,MN(PBS TPT KIDS HD)
KMSP-DT5	9.5	I-M	No		Minneaplis, MN (The Grio)
KMSP-DT6	9.6	I-M	No		Minneapolis, MN (Decades)
WCCO-DT3	32.3	I-M	No		Minneapolis, MN (DABL)

G

Primary Transmitters: Television

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 9221 **Midcontinent Communications** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **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 AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

ACCOMMO											
LEGAL NAME OF OWNER OF Midcontinent Commun		EM:			S	9221	Name				
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG	ì			•				
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.											
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE											
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program											
broadcast by a distant station? Yes XNo Note: If your answer is "Yes," you must complete the program											
log in block 2.	, icave tric	rest of this pag	ge blank. If your answer is	res, you iii	ust complete the program	•					
2. LOG OF SUBSTITUTE	PROGRA	MS									
In General: List each subst				wherever pos	ssible, if their meaning is						
clear. If you need more spa			al pages. ision program (substitute p	rogram) that	during the accounting						
period, was broadcast by a						ion					
under certain FCC rules, re	gulations, o	or authorization	s. See page (vi) of the ger	eral instructi	ons located in the paper						
SA3 form for futher informa titles, for example, "I Love L	tion. Do no	ot use general α RΔ Raskethall:	categories like "movies", oi - 76ers vs. Bulls "	"basketball"	. List specific program						
			r "Yes." Otherwise enter "N	lo."							
			asting the substitute progra								
the case of Mexican or Can		`	ne community to which the								
			tem carried the substitute			th					
first. Example: for May 7 giv		1 (1)									
to the nearest five minutes.			gram was carried by your o			y					
stated as "6:00-6:30 p.m."	•		, ,	·	•						
			was substituted for progra			i					
to delete under FCC rules a gram was substituted for pr											
effect on October 19, 1976.	-	,	on nac pominios to soloto		and and regulations in						
				1 10/11/1	EN CLIDOTITUTE	I					
S	UBSTITUT	E PROGRAM	1	l I	EN SUBSTITUTE BIAGE OCCURRED	7. REASON					
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION					
	722 27 772										
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ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 6.

ACCOUNTING	LINIOD. 2020/2							'	Ortivi	OAJL. I AGE U.			
Name	LEGAL NAME OF								S	YSTEM ID#			
	Midcontinen	it Communic	ations							9221			
J 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 oc- curred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "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."												
		DATES AND HOURS OF PART-TIME CARRIAGE											
	CALL SIGN	WHEN	N CARRIAGE OCCU	JRRED		CALL SIGN	MHE1	N CARRIAGE O	CCUF	RRED			
	OALL GIGIN	DATE	HOUI FROM	RS TO		OALL GIGIV	DATE	FROM	OUR	S TO			
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	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Mic	Icontinent Communications	9221	
all a (as pag	ructions: The figure you give in this space determines the form you fle and the amount y mounts (gross receipts) paid to your cable system by subscribers for the system's second identified in space E) during the accounting period. For a further explanation of how to core (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	dary transmission service	K Gross Receipts
• Con • Con • If you fee • If you accompany	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. For system did not carry any distant television stations, leave block 3 blank. Enter the amount from block 1 on line 1 of block 4, and calculate the total royalty fee. For system did carry any distant television stations, you must complete the applicable parts of system and attach the schedule to your statement of account.	s of the DSE Schedule	L Copyright Royalty Fee
bloc	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be 6 k 3 below. Art 6 of the DSE schedule was completed, the amount from line 7 of block C should be en		
3 be ▶ If pa	elow. art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should		
Block	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more a least the minimum fee, regardless of whether they carried any distant stations. This fee is 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.	\$ 4,682,969.65	
	This is your minimum fee.	\$ 49,826.80	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ir space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule.	4, you must check	
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$ -	
	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	\$ 49,826.80	Cable systems
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	0.00	submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 50,551.80	appropriate form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (So general instructions located in the paper SA3 form for more information.)	ee page (i) of the	auditional lees.

N 1	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Midcontinent Communications	9221
	CHANNELS	
M		
141	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
Channels	to its subscribers and (2) the cable system's total number of activated challines, during the accounting period.	
	Enter the total number of channels on which the cable	
	system carried television broadcast stations	
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations 393	
	and nonbroadcast services	
	INDIVIDUAL TO DE CONTACTED LE FUIDTUED INFORMATION LO NEEDED. (Identificant individual	
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Individual to	ino can contact about and catalonicities a decountry	
Be Contacted		
for Further	Name Wynne Haakenstad Telephone 952-844-2622	1 1
Information		
	Address 3600 Minnesota Drive, STE 700	
	(Number, street, rural route, apartment, or suite number)	
	Edina, MN 55435	
	(City, town, state, zip)	
	Email wynne.haakenstad@midco.com Fax (optional)	
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
0		
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified	
	in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable syste	em.
	in line 1 of space B.	•••
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein	
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.	
	[18 U.S.C., Section 1001(1986)]	
	V	
	/s/ Wynne Haakenstad	
	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 th	ne "F2"
	button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	
	Typed or printed name: Wynne Haakenstad	
	Title: Director of Programming (Title of official position held in corporation or partnership)	
	(Title of oπicial position neid in corporation or partnership)	
	Date: February 22, 2021	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
Midcontinent Communications	9221	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 by additional lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the service of providing secondary transmissions of primary broadcast transmitters, the system shall not scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section for more information on when to exclude these amounts, see the note on page (vii) of the general instruction paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmade by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	he basic include sub- tion 119."	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or une For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	derpayment.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	-	
x	0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)\$	_	
	rest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assist contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	ance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright O please list below the owner, address, first community served, accounting period, and ID number as given in filing.		
Owner		
Address		
First community served		
Accounting period		
ID number		

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

ACCOUNTING PERIOD: 2020/2
DSE SCHEDULE, PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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.

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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

	1 ,	TC Mi
Santa Rosa	Stations A and C 35 mile zone	
	l'、 /	Fir
	`~-/	(Sa
	Fairvale	Gr
Rapid City		DS
		Ва
	Bodega	\$3
 	Bay	\$3
/		Ва
Station	ns B. D.	_
an		To
35 mil	e zone	In
` ~		1

	Distant Stations Carried		Identification of	of Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
J	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 DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

linimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	\$6.384.00

		\$0,304.00				
First Subscriber Group		Second Subscriber Group		Third Subscriber Group		
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)		
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00	
DSEs	2.472	DSEs	1.083	DSEs	1.389	
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80	
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23	
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	

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

ACCOUNTING PERIOD: 2020/2

DSE SCHEDULE. PAGE 11. (CONTINUED)

DSE SCHEDULE. PAGE	LEGAL NAME OF OWNER OF CABL	E OVOTENA			<u> </u>	YSTEM ID#				
1					3	9221				
	Midcontinent Communi					9221				
	SUM OF DSEs OF CATEGOR		IS:							
	Add the DSEs of each station There the sum here and in line		achadula		0.00					
	Enter the sum here and in line	i oi part 5 oi triis	scriedule.		0.00					
_	Instructions:									
2	In the column headed "Call S	Sign": list the cal	I signs of all distant stations	identified by the	e letter "O" in column 5					
Commutation	of space G (page 3). In the column headed "DSE"	's for each indepe	andent station, give the DSE	as "1 0": for or	ach natwork or nancom					
Computation of DSEs for	mercial educational station, give			as 1.0 , 101 ea	deli iletwork of floricom-					
Category "O"	"O" CATEGORY "O" STATIONS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	07.22 0.0.1	332	0.122 0.011		0.1220.011					
		······································								
		···								
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Add rows as										
necessary.										
Remember to copy all										
formula into new										
rows.										
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Name		t Communications						S	
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	st the call sign of all dista :: For each station, give the correspond with the inform in the correspond with the inform in the context of the figure in column at least to the third decire in the cach independent signal walue as ".25." :: Multiply the figure in column in the cach independent independent independent in the cach independent i	the number of mation given in the total number in the total number in the firm 2 by the firm all point. This station, give the fumn 4 by the	hours your cable syster in space J. Calculate on er of hours that the stati gure in column 3, and g is the "basis of carriago ie "type-value" as "1.0."	n carried the stat ly one DSE for e on broadcast ove give the result in o e value" for the si For each networ	ion during the acted station. If the air during the air during the air during the decimals in colur tation. If or noncommer a column 6. Rour	the accounting period. mn 4. This figure must rotal educational station, and to no less than the al instructions in the paper S 5. TYPE VALUE		
Capacity			CATEGOR	Y LAC STATIONS:	COMPUTAT	ION OF DSE	s		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIAC VALUE			6. DS	9221 s d d d d d d d d d d d d d d d d d d
			÷		=	x			
			÷		=	X		······	
			÷		=	x		=	
			÷		=	x			
			÷		=				
			÷		=	x		=	
	Add the DSEs	of CATEGORY LAC Sof each station. Im here and in line 2 of page		hedule,			0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations and effect space I). Column 2: at your option. Column 3: Column 4:	ect on October 19, 1976 (a one or more live, nonnetwo For each station give the This figure should corres Enter the number of days Divide the figure in colum	itution for a pr as shown by t ork programs o number of live spond with the in the calend in 2 by the figu	ogram that your system he letter "P" in column 7 luring that optional carries, nonnetwork programs information in space I. ar year: 365, except in a ure in column 3, and give	was permitted to 7 of space I); and age (as shown by as carried in subst a leap year. te the result in co	o delete under Fo the word "Yes" in titution for progra	CC rules and column 2 of times that were one less that	e deleted n the third	ı.
		SI	JBSTITUTE	E-BASIS STATION	IS: COMPUTA	ATION OF D	SEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	OF DA	YS	1. CALL SIGN	OF		OF DAYS	4. DSE
			:	=		on during the accounting period. This ch station. The air during the accounting period. Excimals in column 4. This figure must atton. To noncommercial educational station, or noncommercial educational station, or noncommercial instructions in the paper. The paper of the general instructions in the paper. The paper of the general instructions in the paper. The paper of the general instructions in the paper. The paper of the general instructions in the paper. The paper of the general instructions in the paper. The paper of the general instructions in the general instructions in the paper. The paper of the general instructions in the paper of the general instructions in the paper of the paper. The paper of the general instructions in the gene			
			÷ ÷	=					form). ER 4. DSE YS AR = = = = = = = = = = = =
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			÷	OF DAYS IN YEAR SIGN OF PROGRAMS OF DAYS IN YEAR = ÷ = = ÷ = = ÷ = = ÷ = = ÷ = = ÷ = = ÷ =					
	Add the DSEs	OF SUBSTITUTE-BASI			▶				=
5		ER OF DSEs: Give the am sapplicable to your system		boxes in parts 2, 3, and	4 of this schedule	e and add them to	provide the t	total	
Total Number	1. Number	of DSEs from part 2 ●				-		0.00	
of DSEs	2. Number	of DSEs from part 3 ●				<u> </u>		0.00	
	3. Number	of DSEs from part 4 ●				-		0.00	
							Γ		
	TOTAL NUMBE	R OF DSEs					▶		0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2020/2

	WNER OF CABLE S						S	YSTEM ID# 9221	Name
In block A:	ck A must be comp		art 6 and part 7	of the DSE schedu	ıle blank and	complete part s	3. (page 16) of the		6
schedule.	,	•	•	01 410 202 0011040	aro biariit aria	complete part	5, (pago 10) of the		
If your answer if "No," complete blocks B and C below. BLOCK A: TELEVISION MARKETS									
effect on June 24, Yes—Com	1981?	schedule—D0	ajor and small	er markets as defin	ed under sect		C rules and regula	tions in	3.75 Fee
	Note please B and			RIAGE OF PERM	AITTED DS	Ee			
Column 1: CALL SIGN	FCC rules and re	of distant sta gulations pric le DSE Sched	tions listed in porto June 25, 1	part 2, 3, and 4 of the 981. For further ex e letter M below refe	nis schedule the planation of p	hat your syster ermitted station	ns, see the	Š	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfatherec instructions fo E Carried pursua *F A station previous	ed pursuant to on as defined al educationa d station (76.6 or DSE schedu ant to individu viously carried IHF station wi	ations cited be to the FCC mare in 76.5(kk) (76.5) I station [76.59.5) (see paragrule). all waiver of FC don a part-tim thin grade-B co	e or substitute basis ontour, [76.59(d)(5)	e in effect on c 57, 76.59(b), (1), 76.63(a) r 8(a) referring t stitution of gra	June 24, 1981. 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered sta	.63(a) referring to 61(e)(1) tions in the		
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 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	
	•					•			
								0.00	
		E	BLOCK C: CO	OMPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of I	DSEs from p	art 5 of this s	chedule				-	
Line 2: Enter the	sum of permitted	d DSEs from	block B abo	/e				-	
				of DSEs subject to of this schedule)		ite.		0.00	
Line 4: Enter gro	ss receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter sur	n here					•	partially permited/ partially
.,	•						Х		nonpermitted carriage? If yes, see part
Line 6: Enter tota	al number of DSE	s trom line	3						9 instructions.
Line 7: Multiply li	ne 6 by line 5 and	d enter here	and on line 2	. block 3. space L	(page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Midcontinent Communications SYSTEM ID#							YSTEM ID# 9221	Name	
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)			_
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
			1			II			

ACCOUNTING PERIOD: 2020/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Midcontinent Communications** 9221 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED DSE PERIOD CARRIAGE SIGN DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? Yes—Complete blocks B and C . X No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Was any station listed in block B of part 7 carried in any commu-Is any station listed in block B of part 6 the primary stream of a commercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN DSE CALL SIGN DSE DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Midcontinent Communications	SYSTEM ID# 9221	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	4,682,969.65	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below.		
	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? 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 DSI	E	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00337 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSI 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)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here	-	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Midcontinent Communications											
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). 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. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	9221									
		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	Instructions: You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5. In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank. What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.											
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	• Did 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.											
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE										
	1	Enter the amount of gross receipts from space K (page 7)	<u>i</u>									
	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.)	0									
	Section 3 If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.											
		A. Enter 0.01064 of gross receipts (the amount in section 1)	_									
		B. Enter 0.00701 of gross receipts (the amount in section 1)										
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here										
		D. Multiply line B by line C and enter here	_									
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)										
		Base Rate Fee	<u> </u>									

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#			
Midco	ontinent Communications	9221	Name		
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.				
4			8		
	A. Enter 0.01064 of gross receipts		J		
	(the amount in section 1) ▶ \$	_			
	B. Enter 0.00701 of gross receipts		Computation		
	(the amount in section 1) > _		of Base Rate Fee		
	C. Multiply line B by 3.000 and enter here >	_			
	D. Enter 0.00330 of gross receipts				
	(the amount in section 1) \$				
	E. Subtract 4.000 from total DSEs				
	(the figure in section 2) and enter here				
	F. Multiply line D by line E and enter here				
	F. Multiply line D by line E and enter here \$				
	G. Add lines A, C, and F. This is your base rate fee.				
	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00			
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca				
instead Space	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe G.	el line-ups in	9		
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee		Computation		
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take a on, you must:	dvantage of this	of		
			Base Rate Fee and		
	livide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine		Syndicated		
	nd the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for	each group.	Exclusivity Surcharge		
	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for Partially		
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only.					
How to	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted		
-	For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	ion you	Stations		
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lo the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)				
Step 3	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant.	Each			
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note th will have only one subscriber group when the distant stations it carried have local service areas that coincide.	at a cable			
Compu	ting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syst	em's subscriber			
	section:				
• Identi	y the communities/areas represented by each subscriber group.				
	he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to al bers in the group.	I of the			
• If:					
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it i s schedule; or,	n parts 2, 3, and			
, .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	lock B,			
• Add t	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.				
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general i paper SA3 form.	nstructions			
• Comp page. DSEs f	the a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the n making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (thor that group's complement of stations and total gross receipts from the subscribers in that group). You do not neemalculations on the form.	at is, the total			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 9221 **Midcontinent Communications** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE Midcontinent Com							9221	Name
				TE FEES FOR EAC	H SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA 0			COMMUNITY/ AREA 0				Computatio	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicate
								Exclusivi
								Surcharg for
	••••							Partially
								Distant
								Stations
				-				
Γotal DSEs	•	'	0.00	Total DSEs	•	••	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	LIP	FOURTH SUBSCRIBER GROUP				
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
	T = ==	II				II		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Γotal DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00			Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	tn Group	\$	0.00	
			criber group a	s shown in the boxes a	bove.	\$	0.00	
Enter here and in block	3, line 1, s	pace L (page 7)				\$	0.00	

Nonpermitted 3.75 Stations

LEGAL NAME OF OW Midcontinent Co			-			:	SYSTEM ID# 9221	Name
				TE FEES FOR EAC				
	SUBSCRIBER GRO			SUBSCRIBER GRO		9		
COMMUNITY/ AREA 0			COMMUNITY/ ARE	Α		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
			<u>.</u>					Syndicated
			····					Exclusivity Surcharge
,								for
								Partially
								Distant
			····					Stations
			····		•••••			
			<u>.</u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	DUP	FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0			COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
			····					
			<u>.</u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00			Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Thir	a Group	\$	0.00	Base Rate Fee Fou	rın Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	•	0.00	
inter here and in blo	JUK J, IINE 1, S	pace L (page /)				\$	0.00	

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Midcontinent Communications** 9221 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 must also compute a 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 Second 50 major television market First 50 major television market of INSTRUCTIONS: Base Rate Fee 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. Exclusivity 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 Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **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 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 computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown