

ACCOUNTING PERIOD: 2021/2

Accounting Period	44228 (enter four digit year and /1 (for Jan-Jun period) or /2 (for Jul-De

INSTRUCTIONS:

B Owner	<p>Give the full legal name of the owner of the cable system in line 1. If the owner is a subsidiary of another corp corporate title of the subsidiary, not that of the parent corporation. In line 2, list any other names under which the owner conducts the business of the cable system If there were different owners during the accounting period, only the owner on the last day of the a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assign</p>	
	2	<p>Viking Electronics, Inc. BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)</p>
	3	<p>MAILING ADDRESS OF OWNER OF CABLE SYSTEM: 110 4th Street E (Number, street, rural route, apartment, or suite number) Park River, ND 58270 (City, town, state, zip)</p>
	<p>INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and c names already appear in space B. In line 2, give the mailing address of the system, if different from the address given</p>	
C System	<p>1 IDENTIFICATION OF CABLE SYSTEM:</p>	
	2	<p>MAILING ADDRESS OF CABLE SYSTEM: (Number, street, rural route, apartment, or suite number) (City, town, state, zip code)</p>

E BLOCK 1

Secondary Transmission Service: Sub- scribers and Rates	CATEGORY OF SERVICE		
		SUBSCRIBERS	RATE
Residential: • Service to first set • Service to additional set(s) • FM radio (if separate rate) Motel, hotel Commercial Converter • Residential • Non-residential		2,448	85.95

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BLOCK 1

F	CATEGORY OF SERVICE		
	Continuing Services:		Installation: Non-residential
Services Other Than Secondary Transmissions: Rates	<ul style="list-style-type: none"> • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	150.00	<ul style="list-style-type: none"> • Motel, hotel • Commercial • Pay cable • Pay cable-add'l channel • Fire protection • Burglar protection Other services: <ul style="list-style-type: none"> • Reconnect • Disconnect • Outlet relocation • Move to new address

CHANNELS

M	<p>Instructions: You must give (1) the number of channels on which the cable system carries to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.</p> <p>1. Enter the total number of channels on which the cable system carried television broadcast stations</p> <p>2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services</p>
---	--

Individual to be Contacted for Further Information	(we can contact about this statement of account.)
Name	Shari Flanders
Address	110 4th Street E 110 4th St E Park River, ND 58270 Park River, ND 58270
Email (optional)	sflanders@polartel.com

<p>O Certification</p>	<p>CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulati Signature Space O – this form will be submitted with an electronic "/s/" signature (e.g., /s/John</p> <p>Typed or printed name: Karl Blake</p> <p>/s/ Karl E</p> <p>Title: Executive Vice President (Title of official) Executive Vice Presid</p> <p>Date: February 16, 2022</p>

ic period) No spaces)

oration, give the full

1.
e accounting period should submit

igned by the Licensing Divisor 11615

BARCODE DATA

Filing Period 20212 (enter four digit year and 1 (for J

):

operation of the system unless these

in space B.

ons.)

Smith). Do not forget to enter an electronic signature by typing "/s/" followed by your name in the signat

lake

ent

an-Jun period) or 2 (for Jul-Dec period) No spaces)

.ire box in Space O of tab "page 8, space M-O".

Total Gross Receipts

\$ 1,196,743.66

OK

Subgroup Gross Receipts Total

\$ 1,196,743.66

Subgroup		Subgroup/Community Name	Gross Receipts
FIRST	1	Gilby, Michigan	\$ 568,653.42
SECOND	2	Cavalier, Crystal	\$ 432,328.54
THIRD	3	Hunter, Arthur	\$ 41,598.92
FOURTH	4	Galesburg	\$ 10,195.75
FIFTH	5	Nekoma	\$ 6,002.39
SIXTH	6	Brocket, Edmore, Lakota	\$ 99,509.50
SEVENTH	7	Hoople, Minto	\$ 38,455.14
EIGHTH	8		
NINTH	9		
TENTH	10		
ELEVENTH	11		
TWELVTH	12		
THIRTEENTH	13		
FOURTEENTH	14		
FIFTEENTH	15		
SIXTEENTH	16		
SEVENTEENTH	17		
EIGHTEENTH	18		
NINTEENTH	19		
TWENTIETH	20		
TWENTY-FIRST	21		
TWENTY-SECOND	22		
TWENTY-THIRD	23		
TWENTY-FOURTH	24		
TWENTY-FIFTH	25		
TWENTY-SIXTH	26		
TWENTY-SEVENTH	27		
TWENTY-EIGHTH	28		
TWENTY-NINTH	29		
THIRTIETH	30		
THIRTY-FIRST	31		
THIRTY-SECOND	32		
THIRTY-THIRD	33		
THIRTY-FOURTH	34		
THIRTY-FIFTH	35		
THIRTY-SIXTH	36		
THIRTY-SEVENTH	37		
THIRTY-EIGHTH	38		
THIRTY-NINTH	39		

FORTIETH	40
FORTY-FIRST	41
FORTY-SECOND	42
FORTY-THIRD	43
FORTY-FOURTH	44
FORTY-FIFTH	45
FORTY-SIXTH	46
FORTY-SEVENTH	47
FORTY-EIGHTH	48
FORTY-NINTH	49
FIFTIETH	50
FIFTY-FIRST	51
FIFTY-SECOND	52
FIFTY-THIRD	53
FIFTY-FOURTH	54
FIFTY-FIFTH	55
FIFTY-SIXTH	56
FIFTY-SEVENTH	57
FIFTY-EIGHTH	58
FIFTY-NINTH	59
SIXTIETH	60
SIXTY-FIRST	61
SIXTY-SECOND	62
SIXTY-THIRD	63
SIXTY-FOURTH	64
SIXTY-FIFTH	65
SIXTY-SIXTH	66
SIXTY-SEVENTH	67
SIXTY-EIGHTH	68
SIXTY-NINTH	69
SEVENTIETH	70
SEVENTY-FIRST	71
SEVENTY-SECOND	72
SEVENTY-THIRD	73
SEVENTY-FOURTH	74
SEVENTY-FIFTH	75
SEVENTY-SIXTH	76
SEVENTY-SEVENTH	77
SEVENTY-EIGHTH	78
SEVENTY-NINTH	79
EIGHTIETH	80
EIGHTY-FIRST	81
EIGHTY-SECOND	82
EIGHTY-THIRD	83
EIGHTY-FOURTH	84
EIGHTY-FIFTH	85
EIGHTY-SIXTH	86
EIGHTY-SEVENTH	87

EIGHTY-EIGHTH	88
EIGHTY-NINTH	89
NINTIETH	90
NINETY-FIRST	91
NINETY-SECOND	92
NINETY-THIRD	93
NINETY-FOURTH	94
NINETY-FIFTH	95
NINETY-SIXTH	96
NINETY-SEVENTH	97
NINETY-EIGHTH	98
NINETY-NINTH	99
ONE HUNDREDTH	100
ONE HUNDRED FIRST	101
ONE HUNDRED SECOND	102
ONE HUNDRED THIRD	103
ONE HUNDRED FOURTH	104
ONE HUNDRED FIFTH	105
ONE HUNDRED SIXTH	106
ONE HUNDRED SEVENTH	107
ONE HUNDRED EIGHTH	108
ONE HUNDRED NINTH	109
ONE HUNDRED TENTH	110
ONE HUNDRED ELEVENTH	111
ONE HUNDRED TWELVTH	112
ONE HUNDRED THIRTEENTH	113
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ONE HUNDRED TWENTIETH	120
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ONE HUNDRED TWENTY-THIRD	123
ONE HUNDRED TWENTY-FOURTH	124
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ONE HUNDRED THIRTIETH	130
ONE HUNDRED THIRTY-FIRST	131
ONE HUNDRED THIRTY-SECOND	132
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ONE HUNDRED THIRTY-SIXTH	136
ONE HUNDRED THIRTY-SEVENTH	137
ONE HUNDRED THIRTY-EIGHTH	138
ONE HUNDRED THIRTY-NINTH	139
ONE HUNDRED FORTIETH	140
ONE HUNDRED FORTY-FIRST	141
ONE HUNDRED FORTY-SECOND	142
ONE HUNDRED FORTY-THIRD	143
ONE HUNDRED FORTY-FOURTH	144
ONE HUNDRED FORTY-FIFTH	145
ONE HUNDRED FORTY-SIXTH	146
ONE HUNDRED FORTY-SEVENTH	147
ONE HUNDRED FORTY-EIGHTH	148
ONE HUNDRED FORTY-NINTH	149
ONE HUNDRED FIFTIETH	150
ONE HUNDRED FIFTY-FIRST	151
ONE HUNDRED FIFTY-SECOND	152
ONE HUNDRED FIFTY-THIRD	153
ONE HUNDRED FIFTY-FOURTH	154
ONE HUNDRED FIFTY-FIFTH	155
ONE HUNDRED FIFTY-SIXTH	156
ONE HUNDRED FIFTY-SEVENTH	157
ONE HUNDRED FIFTY-EIGHTH	158
ONE HUNDRED FIFTY-NINTH	159
ONE HUNDRED SIXTIETH	160

Check figure

Space 9 Gross Receipts	3.75 Fee Space 9 Gross Receipts
<u>1,196,743.66</u>	<u>1,196,743.66</u>
OK	OK

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

STATEMENT OF ACCOUNT

FOR COPYRIGHT OFFICE USE ONLY

for Second

Cable Syst **DATE RECEIVED**

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

	A
	\$
	A

A ACCOUNTING PERIOD COVERED BY THIS STATEMENT

Accounting Period ##

Period

B Instructions:

Owner

not that List any other name or names under which the owner conducts the business during the accounting period. If there were different owners during the accounting period, only the owner on a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned to the system.

MAILING ADDRESS OF OWNER/MAILING ADDRESS OF CABLE SYSTEM

Viking Electronics, Inc.

110 4th S
 Park River, ID

Give the mailing address of the system, if different from the address given in space B.

System

1
 2

IDENTIFICATION OF CABLE SYSTEM:

S O

e, a

Section 1b. Identity only

Served	CITY OR TOWN	S
First	Park River	N
Community		

Reporting communities if you report multiple channel line-ups in Space G.

Sample	Alda	
	Alliance	
	Gering	

Section 1b. Identity only

Section 111 of the United States Code authorizes the Copyright Clearance Center to process your statement of account. It is any personal information that can be used to identify you. By providing PII, you are agreeing to the routine use of it to establish and maintain a public search reports prepared for the public. The effect of not providing the PII requested is that it may affect the legal sufficiency of the filing, a det

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SA3E
Long Form

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AMOUNT

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of the cable system.
the last day of the accounting period should submit
period.
signed by the Licensing Division. 11615

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44228

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prints correctly

STATE		
ID		
A 1		
B	2	
B	3	

to collect the personally identifying information (PII) requested on this
to identify or trace an individual, such as name, address and telephone
public record, which includes appearing in the Office's public indexes and in
delay processing of your statement of account and its placement in the
termination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Viking Electronics, Inc.

Instructions: List each separate community served by the cable system. A “community” in FCC rules: “a separate and distinct community or municipal entity (including unincorporated areas and including single, discrete unincorporated areas.” 47 C.F.R. §76.5(dd). The first of system identification hereafter known as the “first community.” Please use it as the first

Note: Entities and properties such as hotels, apartments, condominiums, or mobile homes below the identified city or town.

If all communities receive the same complement of television broadcast stations (i.e., or all communities with the channel line-up “A” in the appropriate column below or leave them on a partially distant or partially permitted basis in the DSE Schedule, associate each row designated by a number (based on your reporting from Part 9).

When reporting the carriage of television broadcast stations on a community-by-community channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below

CITY OR TOWN
Park River
Adams
Aneta
Arthur
Cavalier
Crystal
Dahlen
Drayton
East Drayton
Edinburg
Edmore
Fairdale
Fordville
Galesburg
Gilby
Hunter
Inkster
Lakota
Brocket
Hoople
Lankin
Michigan
Neché
Nekoma
Niagara

Pembina

Petersburg

St. Thomas

Grafton

Forest River

Northwood

St. Vincent

Argusville

Christine

Wolverton

Minto

ACCOUNTING PERIOD: 2021/2

SYSTEM ID# 11615																																																																																	
<p>community” is the same as a “community unit” as defined for unincorporated communities within unincorporated communities. The first community that you list will serve as a form of the first community on all future filings.</p> <p>File home parks should be reported in parentheses</p> <p>(If you have a channel line-up for all), then either associate the community with a subscriber group or leave the column blank. If you report any stations associated with a subscriber group, you must report the community on a subscriber group basis, associate each community with a subscriber group designated by a number below.</p>			<p>D Area Served</p>																																																																														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">STATE</th> <th style="width: 20%;">CH LINE UP</th> <th style="width: 20%;">SUB GRP#</th> </tr> </thead> <tbody> <tr><td>ND</td><td>1</td><td>1</td></tr> <tr><td>ND</td><td>1</td><td>1</td></tr> <tr><td>ND</td><td>1</td><td>1</td></tr> <tr><td>ND</td><td>1</td><td>3</td></tr> <tr><td>ND</td><td>1</td><td>2</td></tr> <tr><td>ND</td><td>1</td><td>2</td></tr> <tr><td>ND</td><td>1</td><td>1</td></tr> <tr><td>ND</td><td>1</td><td>2</td></tr> <tr><td>ND</td><td>1</td><td>2</td></tr> <tr><td>ND</td><td>1</td><td>1</td></tr> <tr><td>ND</td><td>1</td><td>6</td></tr> <tr><td>ND</td><td>1</td><td>1</td></tr> <tr><td>ND</td><td>1</td><td>1</td></tr> <tr><td>ND</td><td>1</td><td>4</td></tr> <tr><td>ND</td><td>1</td><td>1</td></tr> <tr><td>ND</td><td>1</td><td>3</td></tr> <tr><td>ND</td><td>1</td><td>1</td></tr> <tr><td>ND</td><td>1</td><td>6</td></tr> <tr><td>ND</td><td>1</td><td>6</td></tr> <tr><td>ND</td><td>1</td><td>7</td></tr> <tr><td>ND</td><td>1</td><td>1</td></tr> <tr><td>ND</td><td>1</td><td>1</td></tr> <tr><td>ND</td><td>1</td><td>2</td></tr> <tr><td>ND</td><td>1</td><td>5</td></tr> <tr><td>ND</td><td>1</td><td>1</td></tr> </tbody> </table>			STATE	CH LINE UP	SUB GRP#	ND	1	1	ND	1	1	ND	1	1	ND	1	3	ND	1	2	ND	1	2	ND	1	1	ND	1	2	ND	1	2	ND	1	1	ND	1	6	ND	1	1	ND	1	1	ND	1	4	ND	1	1	ND	1	3	ND	1	1	ND	1	6	ND	1	6	ND	1	7	ND	1	1	ND	1	1	ND	1	2	ND	1	5	ND	1	1	<p>First Community</p> <p>See instructions for additional information on alphabetization.</p> <p>Add rows as necessary.</p>
STATE	CH LINE UP	SUB GRP#																																																																															
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ACCOUNTING PERIOD: 2021/2

Name

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Viking Electronics, Inc.
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E

SERVIC

television and radio broadcasts by your system to subscribers. Give information
Secondary **ce F, not here. All the facts you state must be those existing on the**
Transmissi**ed (June 30 or December 31, as the case may be).**

Service: Sub-

	Number of Subscribers: Both blocks in space E call for the number of subscribers to the
--	---

scribers and **service. In general, you can compute the number of subscribers in**
Rates **s in that category (the number of persons or organizations charged**
ar 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 am
mple: "\$20/mth"). Summarize any standard rate variations within a particular rate
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 tra
systems most commonly provide to their subscribers. Give the number of subscribers and rate fo
that applies to your system. Note: Where an individual or organization is receiving service that fa
categories, that person or entity should be counted as a subscriber in each applicable category. E
subscriber who pays extra for cable service to additional sets would be included in the count unc
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 tha
printed in block 1 (for example, tiers of services that include one or more secondary transmissio
with the number of subscribers and rates, in the right-hand block. A two- or three-word descripti
sufficient.

BLOCK 1 CATEGORY OF SERVICE	NO. OF	RATE		
Residential:	• 2448	86		
	•			
	• F			
Motel, hotel				
Commercial				
Converter				
	• F			
	•			

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

F

ation w

o exceptions: you do not need to give rate information concerning (1) services
Services **ished to nonsubscribers. Rate information should include both the**
Other Than **ually billed. If any rates are charged on a variable per-program basis,**
Secondary **letters "PP" in the rate column.**

Transmissions:

	Block 1: Give the standard rate charged by the cable system for each of the applicable s
--	--

Rates

	Block 2: List any services that your cable system furnished or offered during the accoun listed in block 1 and for which a separate charge was made or established. List these other servic
--	--

brief (two- or three-word) description and include the rate for each.

BLOCK 1

CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential	
• F		• Motel, hotel
• F		• Commercial
• F		• Pay cable
• B		• Pay cable-add'l channel
Installation: Residential			• Fire protection
• I 150			• Burglar protection
• /		Other services:	
• f		• Reconnect
• (.....	• Disconnect
		• Outlet relocation
		• Move to new address

ACCOUNTING PERIOD: 2021/2

SYSTEM ID# 11615	Name
<p>ations and low power television stations) d only on a part-time basis under ain network programs [sections ind (2) certain stations carried on a</p> <p>ur cable system on a substitute program</p> <p>ent and Program Log)—if the</p> <p>ute basis and also on some other f the general instructions located</p> <p>ervices such as HBO, ESPN, etc. Identify ion. For example, report multi- 1 stream separately; for example</p> <p>station for broadcasting over-the-air in may be different from the channel</p> <p>independent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). ie paper SA3 form.</p> <p>er "Yes". If not, enter "No". For an ex- paper SA3 form.</p> <p>in 5, stating the basis on which your ering "LAC" if your cable system :capacity.</p> <p>payment because it is the subject tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form.</p> <p>unity to which the station is licensed by the which the station is identified.</p> <p>each channel line-up.</p>	<p style="text-align: center;">G</p> <p style="text-align: center;">Primary Transmitters: Television</p>
<p>6. LOCATION OF STATION</p>	
<p>Winnipeg-Manitoba</p>	
<p>Winnipeg-Manitoba</p>	
<p>Grand Forks, ND</p>	<p>See instructions for additional information</p>

Pembina, ND

Fargo, Grand Forks, ND

Valley City, Fargo, ND

Fargo, ND

Devils Lake, Grand Forks, ND

on alphabetization.

ACCOUNTING PERIOD: 2021/2

Name

OF OWNER OF CA

H

TRANSMITT

Primary Tra

Special Instructions Concerning All-
 For detailed inform
 located in the paper SA3 form.
 Column 1: Ider
 Column 2: Stat
 Column 3: If the
 signal, indicate th
 Column 4: Give
 Mexican or Canad

CALL SIGN

AM or FM	S/D	DN OF STATION	CALL
FM		Vancouver, BC	
FM		Winnepeg, Manitoba	
FM		Winnepeg, Manitoba	
FM		Winnepeg, Manitoba	
FM		Grafton, ND	
FM		Grafton, ND	
FM		Moorhead, MN	
FM		Grand Forks, ND	
FM		Grand Forks, ND	
FM		Fargo, ND	
FM		Grand Forks, ND	
FM		Grafton, ND	
FM		Crookston, MN	
FM		Grand Forks, ND	
FM		Grand Forks, ND	

CBC
 CIIFM
 CKWG
 CQFM
 KAOC
 KAVJ
 KCCM
 KGFE
 KKXL
 KQWB
 KRRK
 KXPO
 KYCK
 KYTN
 WDAY

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Viking Electronics, Inc.

SUBST I
In Gene

Substitute Carriage: Special Statement and Program Log

1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE

• During broadcast by a distant station?

Note: If log in block 2.

2. LOG OF SUBSTITUTE PROGRAMS

In Gene
clear. If
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period,
under c
SA3 for
titles, fo
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Colu
the cas
Colu
first. Ex
Colu
to the n
stated a
Colu
to delet
gram w
effect o

SUBST
1. TITL

2. LIVE? Yes or No	STATION'S CALL SIGN	4. STATION'S LOCATION		7. REAS
				6. TIMES

ACCOUNTING PERIOD: 2021/2

SY #	Name	
<input checked="" type="checkbox"/> X <input type="checkbox"/>		
:ON FOR DELETION		
— TO		
—		
—		
—		
—		
—		
—		

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Viking Electronics, Inc.

GROSS RECEIPTS

Instructions: The figure you give in this space determines the form you file and the amount of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to complete this space, see page (vii) of the general instructions.

Gross receipts from subscribers for secondary transmission service(s) during the accounting period.

IMPORTANT: You must complete a statement in space P concerning gross receipts.

COPYRIGHT ROYALTY FEE

Instructions: Use the blocks in this space L to determine the royalty fee you owe:

- Complete block 1, showing your minimum fee.
- Complete block 2, showing whether your system carried any distant television stations.
- If your system did not carry any distant television stations, leave block 3 blank. Enter the amount from block 1 on line 1 of block 4, and calculate the total royalty fee.
- If your system did carry any distant television stations, you must complete the applicable part of block 3 accompanying this form and attach the schedule to your statement of account.

If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below.

If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 of block 3 below.

If part 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line 3 of block 3 below.

Block 1	<p>MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more must pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is based on the system's gross receipts for the accounting period.</p> <p>Line 1. Enter the amount of gross receipts from space K</p> <p>Line 2. Multiply the amount in line 1 by 0.01064</p> <p>Enter the result here.</p> <p>This is your minimum fee.</p>
------------	--

Block 2	<p>DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the answer in space G. If, in space G, you identified any stations as "distant" by stating "Yes" in column "Yes" in this block.</p> <p>• Did your cable system carry any distant television stations during the accounting period?</p> <p><input type="checkbox"/> Yes—Complete the DSE schedule. <input type="checkbox"/> No</p>
------------	---

Block 3	<p>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</p> <p>Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero</p>
------------	--

	Line 3. Add lines 1 and 2 and enter here
Block 4	<p>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</p> <p>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.</p> <p>Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)</p> <p>Line 4. FILING FEE.</p> <p>TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here</p> <p>Remit this amount via electronic payment payable to Register of Copyrights. (See general instructions located in the paper SA3 form for more information.)</p>

\$ 18,780.07	
\$ 18,780.07	
0.00	Cable systems submitting additional deposits under Section 111(d)(7) should contact the Licensing
\$ -	additional fees.
\$ 725.00	Division for the appropriate
\$ 19,505.07	form for submitting the additional fees.
see page (i) of the	

ACCOUNTING PERIOD: 2021/2

Name: LEGAL NAME OF OWNER OF CABLE SYSTEM:
Viking Electronics, Inc.

MONTH: CHANNELS
on which the cable system carrier

its total number of activated channels, during the accounting period.

Channels

total number of channels on which the cable

.....

total number of activated channels

system carried television broadcast stations

.....

.....

NAME: **ER INFOR**

Individual to

Be Contacted

for Further

Information

Name: Shari F **Telephone**

Address: 110 4th St
(Number, street, rural route, apartment, or suite number)

Park River
(City, town, state, zip)

Email: **sflanders@polartel.com**

It must be certified and signed in accordance with Copyright Office regulations.)

OR

Certify that (Check one, but only one, of the boxes.)

(Owner other than corporation or partner)

(Agent of owner other than corporation or partner) in line 1 of space B and that the owner is not a

(Officer or partner) I am an officer (if a c
in line 1 of space B.

ereby declare under penalty of law that all statements of fact contained here
of my knowledge, information, and belief, and are made in good faith.

8 U.S.C., Section 1001(1986)]



X

/s/ Karl Blake

K

y

Karl Blake

Title: Executi
(title or official position)

Date: February 18, 202

Privacy Act Notice: Section 111 of title 17 of the United States Code authorize
form in order to process your statement of account. PII is any personal inform
numbers. By providing PII, you are agreeing to the routine use of it to establis
search reports prepared for the public. The effect of not providing the PII requ
completed record of statements of account, and it may affect the legal sufficie

SYSTEM ID#

11615

television broadcast stations

8.00

54

01-284-4343

ber)

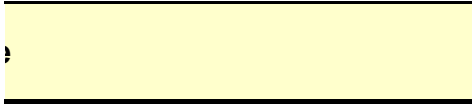
Fax (optional)

orship) I am the owner of the cable system as identified in line 1 of space B; or

or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B; or
corporation or partnership; or

corporation) or a partner (if a partnership) of the legal entity identified as owner of the c

in



end in corporation or partnership)

2

is the Copyright Office to collect the personally identifying information (PII) requested on this
ation that can be used to identify or trace an individual, such as name, address and telephone
h and maintain a public record, which includes appearing in the Office's public indexes and in
ested is that it may delay processing of your statement of account and its placement in the
ncy of the filing, a determination that would be made by a court of law.

prints correctly

:able system

NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, accounting period, and ID number as of the filing date.

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 Office to collect the personally identifiable information in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appropriate 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 it may affect the legal sufficiency of the filing, a determination that would be made by the Copyright Office.

ACCOUNTING PERIOD: 2021/2

SYSTEM ID# ####	Name
<p>by adding the fol-</p> <p>em for the basic hall not include sub- t to section 119.”</p> <p>structions in the</p> <p>lary transmissions</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p style="text-align: center;">P</p> <p style="text-align: center;">Special Statement Concerning Gross Receipts Exclusion</p>
<p>it or underpayment.</p> <p>.3 form.</p> <p>_____</p> <p>_____</p> <p style="text-align: right;">-</p> <p>_____ days</p> <p style="text-align: right;">-</p> <p style="text-align: right;">x 0.00274</p> <p style="text-align: right;">-</p> <p>(interest charge)</p> <p>r assistance please</p>	<p style="text-align: center;">Q</p> <p style="text-align: center;">Interest Assessment</p>

Copyright Office,
given in the original

Identifying information (PII) requested on this
document, such as name, address and telephone
number appearing in the Office's public indexes and in
the report of account and its placement in the
document by a court of law.

INSTRUCTIONS FOR DSE SCHEDULE

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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

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.)

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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 1
- Network: its 0.25
- Noncommercial 0.25

Note that local stations are not counted at all in computing DSEs.

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.)

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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

COMPUT

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.

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- Determine to
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- Subtract be

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PART 7 (**

- Determine m
- Determine V
- Determine D
- Subtract B
- Compute ar

he Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable systems SA3E (Long Form) must pay at least the minimum fee, which is percent of gross receipts. The cable system pays either the minimum or sum of the base rate fee and the 3.75 percent fee, whichever is 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:

-) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
-) 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 could not have exceeded the market quota imposed for the importation of distant stations under those rules.
-) 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 76.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.
-) 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.
-) 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.

O/E: 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.

JLE

line which distant stations were carried by the system pursuant to former FCC rules in effect on June 24, 1981. For any station carried prior to June 25, 1981, 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.

FIGURING THE SYNDICATED EXCLUSIVITY SURCHARGE— OF THE DSE SCHEDULE

line 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. line which station(s) reported in block B, part 6 are commercial HF 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. line which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31, 1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24, 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule. Subtract the exempt DSEs from the number of DSEs determined in block b of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge. Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

DSE SCHEDULE. PAGE 11.

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

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

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

First DSE	1.064% of gross receipts
Each of the second, third, and fourth DSEs	0.701% of gross receipts
The fifth and each additional DSE	0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

5. Calculate a separate (1) the rates given above; (2) the complement of stations; and (3) the amount of stations in that group.

6. Add together the base rate fees to determine the system’s total base rate fee.

7. If any portion of the system is located in a major television market, you must use the Schedule to determine the base rate fee.

What to Do If You Need More Space

If you are using the printed continuation blanks provided should be used. If you need more space in a particular area in question (identifying it as such), you may use the information on that copy, as provided.

Rounding Off DSEs. If a DSE is rounded off to no less than the next whole number, in any case, you must round off to the next whole number.

- When the fourth decimal is 5 or more, round up (example: .0005 rounds up to .001)
- When the fourth decimal is less than 5, round down (example: .0004 rounds down to .000)

The example below is intended to illustrate only the base rate fee for partially distant stations, if any portion of the system is located in a major or smaller television market.

EXAMPLE:

COMPUTATION OF COPYRIGHT ROYALTY FEE FOR CABLE SYSTEM CARRYING MULTIPLE STATIONS

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.	Distant Stations Carried		Identification of Subscriber Group	
	STATION	DSE	CITY	OUTSIDE LOCAL SERVICE AREA
	A (independent)	1.0		
	B (independent)	1.0	Santa Rosa	Stations A, B, D, and E
	C (part-time)	0.083	Rapid City	Stations A and C
	D (part-time)	0.139	Bodega Bay	Stations A and D
	E (network)	<u>0.25</u>	Fairvale	Stations B, C, D, and E
	TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS
	Minimum Fee Total Gross Receipts			\$600,000.00
				x .01064
			<u>\$6,384.00</u>	
First Subscriber Group (Santa Rosa)		Second Subscriber Group (Rapid City and Bodega Bay)		
Gross receipts	\$310,000.00	Gross receipts		
DSEs	2.472	DSEs		
Base rate fee	\$6,497.20	Base rate fee		
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =		
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =		
Base rate fee	<u>\$6,497.20</u>	Base rate fee		
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, bloc

ACCOUNTING PERIOD: 2021/2

base rate fee for each subscriber group, using
 2) the total number of DSEs for that group's
 and (3) the amount of gross receipts attributable

base rate fees for each subscriber group to determine the base rate fee.

If 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.

Use More Space on the DSE Schedule. There are 10 sheets for the schedule. In most cases, the sheets are large enough for the necessary information. If a particular part, make a photocopy of the page (including a continuation sheet), enter the additional information and attach it to the DSE schedule.

When computing DSEs on the DSE schedule, you may

round to the third decimal point. If you round off a DSE in the schedule, use the same DSEs throughout the schedule as follows:
 If the third decimal point is 1, 2, 3, or 4, the third decimal remains the same (e.g., .34647 is rounded to .346).

If the third decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (e.g., .34651 is rounded to .347).

These instructions are intended to supplement the instructions for calculating DSEs for partially distant stations. The cable system is not subject to the Syndicated Exclusivity Surcharge for partially distant stations located within a major television market.

GROUPS LOCATED IN PARTIALLY DISTANT STATIONS

Groups	GROSS RECEIPTS FROM SUBSCRIBERS
ALL	#####
Group A	100,000.00
Group B	70,000.00
Group C, D, and E	120,000.00
GROSS RECEIPTS	#####

Third Subscriber Group (Fairvale)		
\$170,000.00	Gross receipts	#####
1.083	DSEs	1.389
\$1,907.71	Base rate fee	\$1,604.03
1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
98.91	\$120,000 x .00701 x .389 =	327.23
\$1,907.71	Base rate fee	\$1,604.03

SUBSTITUTE-BASIS STATIONS

1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷	=
		÷	=
		÷	=
		÷	=
		÷	=
		÷	=

SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS:
 Add the DSEs of each station.
 Enter the sum here and in line 3 of part 5 of this schedule,

5

Total Number of DSEs

TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4.
 number of DSEs applicable to your system.

- 1. Number of DSEs from part 2= _____
- 2. Number of DSEs from part 3= _____
- 3. Number of DSEs from part 4= _____

TOTAL NUMBER OF DSEs _____

SYSTEM ID#

11615

column 5 of space G (page 3).
 system carried the station during the accounting period. This
 ly one DSE for each station.
 station broadcast over the air during the accounting period.
 nd give the result in decimals in column 4. This figure must
 e value" for the station.
1.0." For each network or noncommercial educational station,

and give the result in column 6. Round to no less than the
 ding, see page (viii) of the general instructions in the paper

COMPUTATION OF DSEs

4. BASIS OF CARRIAGE VALUE	5. TYPE VALUE	6. DSE
	X	=
	X	=
	X	=
	X	=
	X	=
	X	=
	X	=
	X	=

0.00

Log of Substitute Programs) if that station:
 was permitted to delete under FCC rules and regular-
 of space I); and
 carriage (as shown by the word "Yes" in column 2 of

rams carried in substitution for programs that were deleted

 in a leap year.
nd give the result in column 4. Round to no less than the third
 e page (viii) of the general instructions in the paper SA3 form).

3: COMPUTATION OF DSEs

1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷	=
		÷	=
		÷	=
		÷	=
		÷	=
		÷	=

.....u 0.00

and 4 of this schedule and add them to provide the total

	▶	2.25
	▶	0.00
	▶	0.00

▶ 2.25

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LEGAL NAME

Viking Electronics, Inc.

Instructions

BLOCK A:

Computation of 3.75 Fee

Is the cable

Rule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7.

X bc

BLOCK B:

Column List the call
 signs of
 distant
 stations listed

Column Enter the appropriate letter indicating the basis on which you carried a permitted station.
 BASIS (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981)
 PERMA Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c),
 CARF 76.61(b)(c)]
 B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.63(a))
 C Noncommercial educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]
 D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations and
 instructions for DSE schedule).
 E Carried pursuant to individual waiver of FCC rules (76.7)
 *F A station previously carried on a part-time or substitute basis prior to June 25, 1981
 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.63(a)]
 M Retransmission of a distant multicast stream.

Column List the DSE

1. CALL SIGN

2. PERMITTED BASIS	3. DSE		PERMITTED BASIS	3. DSE	
CBV A	1				
CKY A	1				
KGF C	0.25				

2.25

BLOCK C:

Line 1: Enter the total number of DSEs from part 5 of this schedule

Line 2: Enter the sum of permitted DSEs from block B above

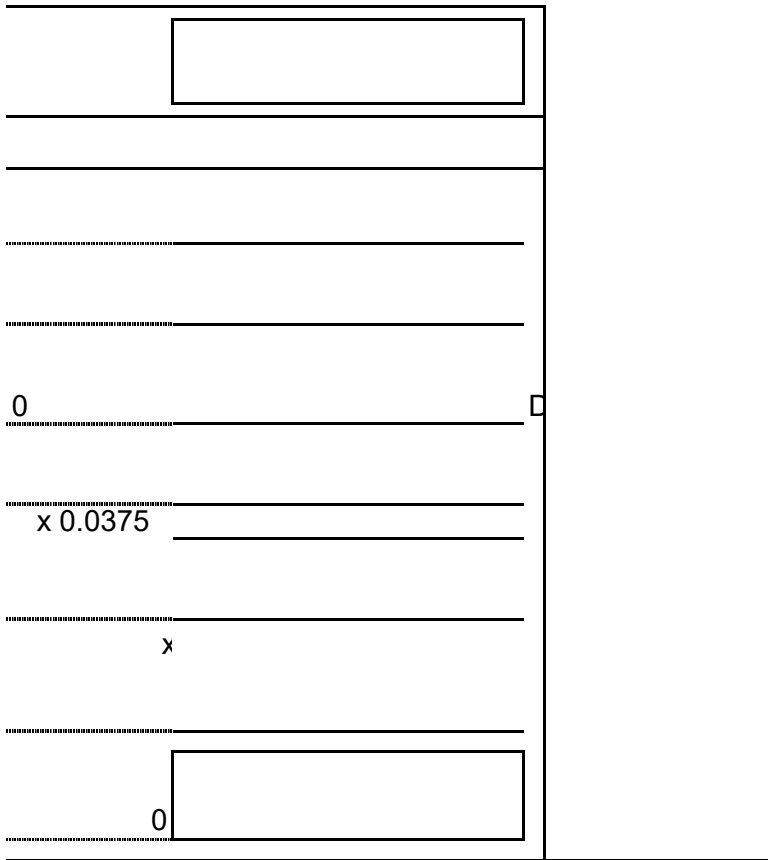
Line 3: Sub
(If 2

Line 4: Enter gross receipts from space K (page 7)

Line 5: Multiply line 4 by 0.0375 and enter sum here

Line 6: Ent

Line 7: Multiply line 6 by line 5 and enter here and on line 2, block 3, space L (page 7)



LEGAL NAME OF OWNER OF CABLE SYSTEM:
Viking Electronics, Inc.

BLOCK D: COMPUTATION OF THE SYNC

Section 1	Enter the amount of gross receipts from space K (page 7)
Section 2	<p>A. Enter the total DSEs from block B of part 7</p> <p>B. Enter the total number of exempt DSEs from block C of part 7</p> <p>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</p>

• Is any portion of the cable system within a top 50 television market as defined in section 1.01 of the rules? Yes—Complete section 3 below.

SECTION 3: TOP 50 TELEVISION MARKET

Section 3a	<p>• Did your cable system retransmit the signals of any partially distributed stations? <input checked="" type="checkbox"/> Yes—Complete part 9 of this schedule. <input type="checkbox"/> No</p> <p>If the figure in section 2, line C is 4.000 or less, compute your surcharge as follows: If the figure is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A. If the figure is more than 1.0 but less than 4.000, multiply the gross receipts by .00377 by the DSE. Enter the result on line B. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here</p> <p>D. Multiply line B by line C and enter here</p> <p>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</p>
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Section 3b	<p>If the figure in section 2, line C is more than 4.000, compute your surcharge as follows: Multiply the gross receipts by .00599 by the DSE. Enter the result on line A.</p> <p>A. Enter 0.00599 of gross receipts (the amount in section 1)</p>
------------	--

- 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 figure on line C in section 2
- 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

Section
4a

Did your cable system retransmit the signals of any partially distant stations?

Yes—Complete part 9 of this schedule. No

If the figure in section 2, line C is 4.000 or less, compute your surcharge. If the figure is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter here and on line 2 of block 4 in space L (page 7)

- 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. 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

SYSTEM ID# 11615	Name
SYNDICATED EXCLUSIVITY SURCHARGE	
..... \$ 1,196,743.66	<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">7</div> Computation of the Syndicated Exclusivity Surcharge
..... 0.00	
..... 0.00	
Number of DSEs 	
} \$ 0.00	
Defined by the FCC? <input checked="" type="checkbox"/> No—Complete section 4 below.	
TELEVISION MARKET	
How many television stations during the accounting period? No—Complete the applicable section below.	
Charge here and leave section 3b blank. NOTE: If the DSE enter the result on line A below.	
..... \$ 	
..... \$ 	
..... 	
..... \$ 	
Charge here and leave section 3a blank.	
..... \$ 	

..... \$ _____

..... \$ _____

..... \$ _____

.....) and enter here _____

..... \$ _____

..... \$ _____

TELEVISION MARKET

..... it television stations during the accounting period?

| No—Complete the applicable section below.

..... charge here and leave section 4b blank. NOTE: If the DSE
 ter the result on line A below.

..... \$ _____

..... \$ _____

..... section 2) _____

..... \$ _____

..... \$ _____

ACCOUNTING PERIOD: 2021/2

Name of Owner of Cable System: Viking Electronics, Inc.

7	Section	Computation of the Syndicated Exclusivity Surcharge	amount in	
		Computation of the Syndicated Exclusivity Surcharge	amount in	

8 **INSTRUCTIONS:**

Partially Distant Stations

• In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. **Do not include the base rate fee in block B. Leave part 9 blank.** **If you carry 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 stations were located within that station's local service area and others were located outside that area. For the definition of "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** **No—Complete the form below.**

BLOCK B: NO PARTIALLY DISTANT STATIONS CARRIED

Section	1	in space
Section	2	<p>the total part 6 was</p> <p>use the total number of DSEs from part 5.)</p>
Section	3	<p>pute you</p> <p>NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by th</p> <p>A. Enter 0.01064 of gross receipts (the amount in section 1).</p> <p>B. Enter 0.00701 of gross receipts u</p> <p>C. Subtract 1.000 from total DSEs u</p> <p>D</p> <p>E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)</p> <p style="text-align: right;">u</p>

#

		u ↓	[Redacted]
.....u	\$		[Redacted]
		u ↓	[Redacted]
.....u	\$		[Redacted]
.....u			[Redacted]
		u ↓	[Redacted]
		u ↓	[Redacted]

ns.

ne of your subscribers
efinition of a station's "local

nting period?

ollowing sections.

..... u \$ _____

..... u _____

the DSE. Enter the result on line A below.

..... u \$ _____

..... u \$ _____

0
..

↕

LE	Viking Electronics, Inc.		
Se	Compute you		
4	A. 4 of gross receipts (the amount in section 1) u ↓ _____	
	B. 1 of gross receipts (the amount in section 1) u ↓ _____	
	C. 3.000 and enter here u ↓ _____	
	D. 0 of gross receipts (the amount in section 1) u ↓ _____	
	E. 00 from total DSEs (figure in section 2) and enter here u _____	
	F. line E and enter here u ↓ _____	
e	G. This is your base rate fee. and in block 3, line 1, space L (page 7) Base Rate Fee u ↓ _____	0

IN
of
Base Rate Fee
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1

2

- Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.
- Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the guide in the paper SA3 form.

•

ACCOUNTING PERIOD: 2021/2

SYSTEM ID# e ####	
_____	0

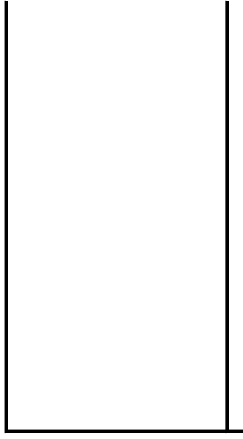
\$ _____ -	

General instructions

ACCOUNTING PERIOD: 2021

Name

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	S
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	.l
	fr
	S
	s
	C
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R OF CABLE SYSTEM:

ronics, Inc.

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 for partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more 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 permitted signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross revenue by 3.75 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the fees 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 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 a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. 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 DSE entered into on or before June 30, 2009 between a cable system or an association representing the cable system transmitter or an association representing the primary transmitter.

ITEM ID#

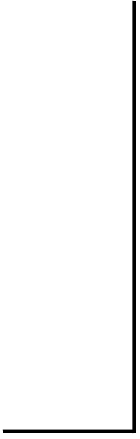
the fee for wholly and
permitted signals in these

partially nonpermitted distant
receipts by total DSEs by
the gross receipts reported

permitted distant

ing that is transmitted from
eam. The 3.75 Percent Rate
ream.

ect of a written agreement
ble system and a primary



LEGAL NAME OF OWNER OF CABLE SYSTEM:

Viking Electronics, Inc.

BLOCK A:			9
	FIRST GROUP		SECO

COMMUNITY/ AREA	Gilby,	COMMUNITY/ AREA	Cavali
	Petersburg		

CALL SIGN	DSE		DSE	CALL SIGN	DSE
CBWT	##		1.00		
CKY	##		1.00		
Inkster, Niagara, Aneta,			#N/A		
Dahlen, Fairdale, Lankin			#N/A		
Grafton, Forest River			#N/A		
Northwood			#N/A		

Total DSEs	2	Total DSEs
------------	---	------------

Gross Receipts First Group	\$ #	Gross Receipts Second Group
----------------------------	------	-----------------------------

Base Rate Fee First Group	\$ #	Base Rate Fee Second Group
---------------------------	------	----------------------------

	THIRD GROUP	FOUR
--	-------------	------

COMMUNITY/ AREA	Hunte	COMMUNITY/ AREA	Gales
	Argusville,		

CALL SIGN	DSE		DSE	CALL SIGN	DSE
CKY	##		1.00	CKY	##
CBWT	##		1.00	CBWT	##
KGFE	##		0.25	KGFE	##

Total DSEs

2

Total DSEs

Gross Receipts Third Group

{ #

Gross Receipts Fourth Group

Base Rate Fee Third Group

{ #

Base Rate Fee Fourth Group

Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.
 Enter here and in block 3, line 1, space L (page 7)

ACCOUNTING PERIOD: 2021/2

11615	SYSTEM ID# 2
R GROUP	

Computation

	DSE	of
		1.00
		1.00
		#N/A
		#N/A
		#N/A
		#N/A

0 _____

\$0

R GROUP	
---------	--

	DSE	
		1.00
		1.00
		0.25

2

\$ #

\$ #

\$ #

#

Space 9 Gross Receipts

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Viking Electronics, Inc.

BLOCK A:					9
	FIFTH GROUP			SIXTH	

COMMUNITY/ AREA	Nekor			COMMUNITY/ AREA	Brocke
-----------------	-------	--	--	-----------------	--------

CALL SIGN	DSE		DSE	CALL SIGN	DSE
CBWT	##		1.00	CBWT	##

Total DSEs	_____				Total DSEs	_____
Gross Receipts First Group	\$ _____				Gross Receipts Second Group	_____
Base Rate Fee First Group	_____				Base Rate Fee Second Group	_____

	SEVEN GROUP			EIGHT	
--	-------------	--	--	-------	--

COMMUNITY/ AREA	Hoopl			COMMUNITY/ AREA	0
-----------------	-------	--	--	-----------------	---

CALL SIGN	DSE		DSE	CALL SIGN	DSE

Total DSEs

Total DSEs

Gross Receipts Third Group

\$ _____

Gross Receipts Fourth Group

Base Rate Fee Third Group

Base Rate Fee Fourth Group

Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.
 Enter here and in block 3, line 1, space L (page 7)

SYSTEM ID# ↘ 11615
R GROUP

Computation

	DSE	of
		1.00

1 _____

€ # _____

\$ #

R GROUP

	DSE	

0

\$ 0

\$0

\$	
----	--

Total DSEs

Total DSEs

Gross Receipts Third Group

\$ _____

Gross Receipts Fourth Group

Base Rate Fee Third Group

\$

Base Rate Fee Fourth Group

Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.
 Enter here and in block 3, line 1, space L (page 7)

SYSTEM ID# 11615	
------------------	--

R GROUP

..... Computation

	DSE	of
		#N/A
		#N/A

0 _____

⊗ # _____

\$0

R GROUP

	DSE	

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Viking Electronics, Inc.

BLOCK A:		9
	FIFTH GROUP	SIXTH

COMMUNITY/ AREA	Nekor	COMMUNITY/ AREA	Brook
-----------------	-------	-----------------	-------

CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
				CKY	##

Total DSEs				Total DSEs
------------	--	--	--	------------

Gross Receipts First Group				Gross Receipts Second Group
----------------------------	--	--	--	-----------------------------

Base Rate Fee First Group				Base Rate Fee Second Group

SEVEN GROUP	EIGHT
-------------	-------

COMMUNITY/ AREA	Hoopk	COMMUNITY/ AREA	0
-----------------	-------	-----------------	---

CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CBWT	##		1.00		
CKY	##		1.00		

Total DSEs

Total DSEs

Gross Receipts Third Group

\$ _____

Gross Receipts Fourth Group

Base Rate Fee Third Group

\$

Base Rate Fee Fourth Group

Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.
 Enter here and in block 3, line 1, space L (page 7)

SYSTEM ID# ➤ 11615	
-----------------------	--

R GROUP	
---------	--

Computation

	DSE	of

1 _____

\$ # _____

\$ #

R GROUP	
---------	--

	DSE	
		1.00
		1.00

0

\$ 0

\$ 0

\$

ACCOUNTING PERIOD: 2021/2

Name of Owner of Cable System

EXCLUSIVITY

Part 9 Market and

by section 76.5 of FCC rules in effect on June 24, 1981:

Computation

of **Block C First 50 major television market**

Section

Base **INSTRUCTIONS:**

and **Block C** for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.

Subscriber group for the VHF Grade B contour stations that were classified as Block C, part 7 of this schedule. If none enter zero.

for This is the total number of DSEs used to compute the surcharge.

Particular group using the formula outlined in block D, section 3 or 4 of part 7 of this

Disbursements receipts figures applicable to the particular group. You do not need to show

Step actual calculations on this form.

FIRST SUBSCRIBER GROUP

Line 1: Enter the VHF DSEs

the Exempt

and enter here. This is the

total number of DSEs for this subscriber group subject to the surcharge

computation

#

SYNDICATED EXCLUSIVITY

SURCHARGE

First Group . . \$

THIRD SUBSCRIBER GROUP

Line 1: Enter the VHF DSEs

Line 2: Enter the Exempt DSEs

Line 3: Subtract line 2 from line 1
and enter here. This is the
total number of DSEs for
this subscriber group
subject to the surcharge
computation

SYNDICATED EXCLUSIVITY
SURCHARGE
Third Group . \$

--

L
I
S
S

SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown
in the boxes above. Enter here and in block 4, line 2 of space L (page 7)

SYSTEM ID#

11615

and 50 major television market

Line 1: Enter the VHF DSEs

Line 2: Enter the Exempt DSEs

Line 3: Subtract line 2 from line 1
and enter here. This is the
total number of DSEs for
this subscriber group
subject to the surcharge
computation

#

INDICATED EXCLUSIVITY
SURCHARGE

\$

Line 1: Enter the VHF DSEs

Line 2: Enter the Exempt DSEs

Line 3: Subtract line 2 from line 1
and enter here. This is the
total number of DSEs for
this subscriber group
subject to the surcharge
computation

INDICATED EXCLUSIVITY
SURCHARGE

\$

\$



ACCOUNTING PERIOD: 2021/2

CONTROL #:

REMITTANCE #:

Cable Worksheet

Total amount of
remittance

Number of SAs rec'd

Date of remittance

Cable ID #				Amo
Examined by	Reviewed by	Date examination completed	Allocation number	

Space A Accounting Period	

Space B Owner	

Space D Area Served	

Space E Secondary Transission Service Subscribers: and Rates	

Space G Primary Transmitters:	
-------------------------------------	--

Initials

unt Initials

Space I
Substitute
Carriage

Space J
Part-time
Carriage Log
(SA3 only)

Space K
Gross Receipts

Space L
Copyright Filing
and Royalty
Fees

Space M
Channels

**Space O
Certification**

**Space P
Statement of
Gross Receipts**

**Space Q
Interest
Assessment**