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

SA1-2E Short Form

Return completed workbook

STATEM	ENT OF ACC	OUNT	FOR COPYRIC	GHT OFFICE USE ONLY	by email to:
	ry Transmission		DATE RECEIVED	AMOUNT	-
General instru	ems (Short Form) actions are located of this workbook		02/21/2019	\$ ALLOCATION NUMBER	coplicsoa@loc.gov For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACCOUNTING PE		BY THIS STATEMENT: (Y	'YYY/(Period))	
	2018/2		Period 1 = January 1 - June 30 Barcode Data Filing Period (option	Period 2 = July 1 - December 31 al - see instructions)	
Accounting Period					
B Owner	of the subsidiary, List any other nar If there were diffe	not that of the parent co ne or names under which erent owners during the	prporation. In the owner conducts the business of	the last day of the accounting period should	
			g. If not, enter the system's ID numbe		24224
	LEGAL NAME	OF OWNER/MAILING	GADDRESS OF CABLE SYSTEM	Λ	
		N HOLDINGS LLC			
			CABLE SYSTEM (IF DIFFEREN	Т)	
		RESS OF OWNER OF	CABLE SYSTEM		
		AND PARKPLAC al route, apartment, or suite n			
	KIRKLAND (City, town, state, zip				
С				entify the business and operation of the he system, if different from the addres	
System		OF CABLE SYSTEM:			
	WAVE BRC				
		SS OF CABLE SYSTEM			
		AND PARKPLAC			
	KIRKLAND	WA 98033			

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	WAVE DIVISION HOLDINGS LLC	24224
D	Instructions: List each separate community served by the cable system. A ' "a separate and distinct community or municipal entity (including unincorp discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community t as the "first community." Please use it as the first community on all future	'community" is the same as a "community unit" as defined in FCC rules: orated communities within unincorporated areas and including single, that you list will serve as a form of system identification hereafter knowr
A	Note: Entities and properties such as hotels, apartments, condominiums, o	
Area Served	identified city.	
	CITY OR TOWN	STATE
First	DEPOE BAY	OR
Community		
Rows as Necessary	/	

	T							FORM SA1	-
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:						SYS	
	WAVE DIVISION HOLD	NGS LLC							2422
-	SECONDARY TRANSMISSION	I SERVICE: SL	JBSCRI	BERS AND R	ATES				
E	In General: The information in s								
Secondary	system, that is, the retransmissi about other services (including p								
Secondary Transmission	last day of the accounting period	· · ·					nose exis	ung on the	
Service: Sub-	Number of Subscribers: Bot						ble system	n, broken	
scribers and	down by categories of secondar	y transmission	service.	. In general, yo	u can con	npute the numbe	er of subso	ribers in	
Rates	each category by counting the n			•••				s charged	
	separately for the particular server Rate: Give the standard rate of							ge and the	
	unit in which it is generally billed	-	-	•				-	
	category, but do not include disc	· · ·	,		,			F	
	Block 1: In the left-hand block	•		Ũ		•			
	systems most commonly provide								
	that applies to your system. Not categories, that person or entity								
	subscriber who pays extra for ca								
	first set" and would be counted of								
	Block 2: If your cable system					service that are	different	from those	
	printed in block 1 (for example, t					,		, 0	
	with the number of subscribers a	and rates, in the	e right-h	and block. A t	vo- or thre	e-word descript	ion of the	service is	
	sufficient.	OCK 1					BLOC	٢2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIBI		RATE	САТ	EGORY OF SEF		NO. OF SUBSCRIBERS	RAT
	Residential:	1886		25.95	0,11		(TOL	COBCONDENCE	TOTT
	Service to first set	1000		20.00					
	Service to additional set(s)								
	• FM radio (if separate rate)								
	Motel, hotel		210	25.95					
	Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s				
E	In General: Space F calls for ra	te (not subscrib	per) info	rmation with re	spect to a	all your cable sys	tem's serv	vices that were	
F	not covered in space E, that is, t								
Sanvisas	service for a single fee. There a furnished at cost or (2) services	•			•		0 (,	
Services Other Than	amount of the charge and the un								
Secondary	enter only the letters "PP" in the		acaany	Shieu: It uny te				rogram baolo,	
ransmissions:	Block 1: Give the standard ra								
	Block 2: List any services that								
Rates		separate charg		nade or establ	shed. List	these other ser	vices in th	e form of a	
Rates	listed in block 1 and for which a	ntion and includ		to for oach					
Rates	listed in block 1 and for which a brief (two- or three-word) descri	ption and includ	ie the ra	ate for each.					
Rates	brief (two- or three-word) descri	BLO	CK 1			D.175	0.175.0	BLOCK 2	
Rates	brief (two- or three-word) descrip	BLO	CK 1 CATEG	ORY OF SER	-	RATE	CATEG	BLOCK 2 ORY OF SERVICE	RATE
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	BLOO RATE	CK 1 CATEG Installa	ORY OF SER	-	RATE	CATEG		RATE
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	BLO	CK 1 CATEG Installa • Mot	ORY OF SER titon: Non-res	-	RATE	CATEG		RATE
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	BLOO RATE	CK 1 CATEG Installa • Mot • Cor	GORY OF SER Intion: Non-res rel, hotel Inmercial	-	RATE	CATEG		RATE
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	BLOO RATE	CK 1 CATEG Installa • Mot • Cor • Pay	ORY OF SER ation: Non-res tel, hotel nmercial r cable	idential	RATE	CATEG		RATE
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection	BLOO RATE	CK 1 CATEG Installa • Mot • Cor • Pay • Pay	CORY OF SER ation: Non-res tel, hotel nmercial r cable r cable-add'l ch	idential	RATE	CATEG		RATE
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	BLO0 RATE 17.00	CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire	GORY OF SER ation: Non-res rel, hotel nmercial r cable r cable-add'l ch e protection	idential	RATE	CATEG		RATE
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	BLOC RATE 17.00 29.95	CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur	GORY OF SER ation: Non-res rel, hotel nmercial cable cable-add'l ch protection glar protection	idential	RATE	CATEG		RATE
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	BLOC RATE 17.00 29.95	CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur	GORY OF SER ation: Non-res tel, hotel nmercial cable cable-add'l ch protection glar protection services:	idential		CATEG		RATE
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	BLOC RATE 17.00 29.95	CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s • Rec	ORY OF SER ation: Non-res tel, hotel nmercial cable-add'I ch protection glar protection services: connect	idential	RATE	CATEG		RATE
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	BLOC RATE 17.00 29.95	CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s • Rec • Disc	CORY OF SER ation: Non-res tel, hotel nmercial cable-add'l ch protection glar protection services: connect connect	idential		CATEGO		RATE
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	BLOC RATE 17.00 29.95	CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur • Cother s • Rec • Disc • Out	ORY OF SER ation: Non-res tel, hotel nmercial cable-add'I ch protection glar protection services: connect	idential		CATEG		RATE

	LEGAL NAME OF OWNER OF O	CABLE SYSTEM:		SYSTEM
Name	WAVE DIVISION HOLD	DINGS LLC		24
	PRIMARY TRANSMITTERS: 1	TELEVISION		
G	carried by your cable system	ntify every television station (including tr n during the accounting period, <i>except</i> (n effect on June 24, 1981, permitting the	(1) stations carried only on a part	t-time basis under
Primary	76.59(d)(2) and (4), 76.61(e))(2) and (4), or 76.63 (referring to 76.61		
Transmitters: Television		explained in the next paragraph. With respect to any distant stations car	rried bv your cable system on a sı	ubstitute program
	basis under specific FCC rule	les, regulations, or authorizations: in space G—but do list it in space I (the		
	station was carried only on a	a substitute basis.	-	
		Iso in space I, if the station was carried n concerning substitute basis stations, s		
	Column 1: List each station's	's call sign. <i>Do not</i> report origination pro- with a station according to its over-the-	rogram services such as HBO, ES	SPN, etc. Identify each
	"WETA-2" as the same on the	ne form.	.	
		I number the FCC assigned to the televing reasons and the televing the	ision station for broadcasting over	r the air in its community
	Column 3: Indicate in each c	case whether the station is a network st	•	
	(for independent multicast), "	ring the letter "N" (for network), "N-M" (for "E" (for noncommercial educational), or	"E-M" (for noncommercial educat	
	0	rms, see page (iv) of the general instruc n of each station. For U.S. stations, list tl		n is licensed by the
		lian stations, if any, give the name of the	•	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KATU - ABC	2	Ν	PORTLAND, OR
d Rows as Necessary	KATUDT2 - MeTV	2.2	N	PORTLAND, OR
	KATUDT3 - Comet	2.3	N	PORTLAND, OR
	KOIN - CBS	6	Ν	PORTLAND, OR
	KOINDT2 - getTV	6.2	Ν	PORTLAND, OR
	KOINDT3 - Decades	6.3	Ν	PORTLAND, OR
	KGW - NBC	8	Ν	PORTLAND, OR
	KGWDT2 - Justice Ne	8.2	N	PORTLAND, OR
	KGWDT4 - Quest	8.4	N	PORTLAND, OR
	KOPB - PBS	10	E	PORTLAND, OR
	KPTV - FOX	12	Ν	PORTLAND, OR
	KPTVDT2 - Cozi TV	12.2	N	PORTLAND, OR
	KPTVDT3 - Laff	12.3	N	PORTLAND, OR
	KWVT - Youtoo Ameri	17.1	N	SALEM, OR
	KPXG - ION	22	N	SALEM, OR
	KNMT - TBN	24	N	PORTLAND, OR
	KRCW - CW	32	N	SALEM, OR
	KRCWDT2 - Antenna	32.2	N	SALEM, OR
	KRCWDT3 - This TV	32.3	N	SALEM, OR
	KWVT - Azteca	37.1	N	SALEM, OR
			Ν	VANCOUVER, WA
	KPDX - MyNetworkTV	49		
	KPDX - MyNetworkTV KPDXDT2 - Escape	49 49.2	N	VANCOUVER, WA
	-			

Accounting Period:	: 2018/2	FORM SA1-2E. PAGE 3.
Manag	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	WAVE DIVISION HOLDINGS LLC	24224
	PRIMARY TRANSMITTERS: TELEVISION	
G	In General: In space G, identify every television station (including translator stations and low power television station carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis of FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section]	under ons
Primary Transmitters: Television	 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 carries 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. 	
	 basis under specific 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. 	9
	• 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. Column 1: List each station's call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Ide	entify each
	multicast stream associated with a station according to its over-the-air designation. For example, report multistre	-
	"WETA-2" as the same on the form.	
	Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in it of license. For example, WRC is channel 4 in Washington, D.C.	s community
	Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncomm	ercial
	educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-	
	(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multic	ast).
	For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form. Column 4: 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	
	1. CALL SIGN 2. B'CAST CHANNEL NUMBER 3. TYPE OF STATION	4. LOCATION OF STATION

EGAL NAME OF								SYSTEM 242
	every radio s	station ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation abour m. lentify the call tate whether t the radio stat this by placing ive the statior	y the sys be recei t the Cc sign of e the static ion's sign g a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante his point, see pa ed by the cable s le station is licens	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	?) it can ertain st eneral i eparate	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
ONLE OIOIT		0,0		CALL CIGIN		0,0		
				[
						·		

Accounting Perio	od: 2018/2						FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	WAVE DIVISION HOLD	DINGS LL	С					24224
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	NT AND PROGRAM LO	G			
	In General: In space I, ident	-	-			tion that you	ir cabla eve	tem carried on a
-	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE				
Special	 During the accounting per 				asis anv noni	network telev	ision prod	ram
Statement and	broadcast by a distant sta				,,			
Program Log	DIDAUCASI DY A DISIAITI SIA						YES	× NO
	Note: If your answer is "No	", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you ı	must comple	te the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI							
	In General: List each subs				s wherever p	ossible, if the	eir meaning	g is
	clear. If you need more spa					la		·
	period, was broadcast by a			vision program ("substitut				
	under certain FCC rules, re							
	Do not use general categor							
	"NBA Basketball: 76ers vs.							
				er "Yes." Otherwise enter				
				casting the substitute prog		oonood by th		in
	the case of Mexican or Car			the community to which the community with which the				111
				stem carried the substitut			, with the n	nonth
	first. Example: for May 7 gi		, ,		1 0			
				ogram was carried by you				ately
	to the nearest five minutes.	Example:	a program car	ried by a system from 6:0	1:15 p.m. to 6	6:28:30 p.m.	should be	
	stated as "6:00–6:30 p.m."	er "R" if the	listed program	n was substituted for prog	ramming that	t vour syster	n was <i>rea</i> u	uired
	to delete under FCC rules							
	was substituted for program							-9.5
	effect on October 19, 1976							
						N SUBSTIT		7. REASON FOR
	5		E PROGRAM			AGE OCCL 6. TI		DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM -	- TO	
		100 01 110	0/122 01011					
							-	
							-	
						_	_	
							-	
						_	-	
							-	
						-	-	
							-	
						_	_	
							-	
						_	-	
							-	
						_	-	
					, ,			

Accounting Period:	2018/2		FORM	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: WAVE DIVISION HOLDINGS LLC		ŝ	8YSTEM ID# 24224
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the am all amounts (gross receipts) paid to your cable system by subscribers for the system's s (as identified in space E) during the accounting period. For a further explanation of how page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	secondary transm to compute this a	ission service amount, see \$ 29	
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less t • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less t See page (vi) of the general instructions located in the paper SA1-2 form for more informatic	han \$527,600 on.	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OF			
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that accounting period is \$52.00 Line 1. Royalty fee for accounting period			
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8			0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and	2		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but n		-	
	1. Base amount under statutory formula	263,800.00		
	2. Enter amount of gross receipts from space K			
	3. Subtract line 2 from line 1			
	4. Enter the amount of gross receipts from space K	· · <u> </u>		
	5. Enter the amount from line 3	· · <u> </u>		
	6. Subtract line 5 from line 4			
	7. Multiply line 6 by .005 (enter figure here)			
	8. Interest charge. Enter the amount from line 4, space Q, page 8			0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8			
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (bu	t less than \$527	600)	
	1. Enter the amount of gross receipts from space K	290,714.00		
	2. Base amount under statutory formula	263,800.00		
	3. Subtract line 2 from line 1 \$	26,914.00		
	4. Multiply line 3 by .01	\$	269.14	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)		1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8		0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6	;	\$	1,588.14
	FILING FEE AND TOTAL REMITTANCE DUE			
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	\$	1,588.14	
	2. Filing Fee (See the instructions for more information on filing fee calculations)	\$	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3		\$	1,608.14
	Important: Your remittance must be in the form of an electronic payment pay See page i of the general instructions in the paper SA1-2 form f	-		ghts!

Accounting Period:	2018/2	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: WAVE DIVISION HOLDINGS LLC	SYSTEM ID# 24224
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television bractivated channels during the accounting performed television of channels on which the cable system carried television broadcast stations 1. 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 and nonbroadcast services	257
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to view can contact about this statement of account.)	whom
for Further Information	Name OXANA SOSKOVA	Telephone 425-576-8200
	Address 401 KIRKLAND PARKPLACE SUITE 500 (Number, street, rural route, apartment, or suite number) KIRKLAND WA 98033 (City, town, state, zip)	
	Email tax.dept@wavebroadband.com Fax (opt	ional) 425-576-8221
O Certification	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright O I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified (Agent of owner other than corporation or partnership) I am the duly authorized agent of the original in line 1 of space B and that the owner is not a corporation or partnership; or X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal en in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fa are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good fa [18 U.S.C., Section 1001(1986)] 	d in line 1 of space B; or owner of the cable system as identified tity identified as owner of the cable system act contained herein
	Enter an electronic signature on the line above to certify this s Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	statement.
	Typed or printed name: JOHN FEEHAN Title: CFO (Title of official position held in corporation or partnership)	
	Date: 2/1	5/19

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

-	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
VE DIVISION HOLDINGS LLC	2422
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? NO 	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name Name Mailing Address Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
	Q
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q Interest Assessmer
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Interest Assessment
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	

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