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

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY					
DATE RECEIVED	AMOUNT				
2/26/2019	\$ ALLOCATION NUMBER				

Return completed workbook by email to:

#### coplicsoa@loc.gov

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

_	1	
A	ACC	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		Barcode Data Filing Period (optional - see instructions)
Accounting Period		
		Instructions;
В		Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.
Owner		List any other name or 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 accounting period should submit 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 by the Licensing Division.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		WINDSTREAM OHIO INC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		2000 COMMUNICATIONS BLVD (Number, street, rural route, apartment, or suite number)
		BALDWIN GA 30511-1762
		(City, town, state, zip)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
System	1	IDENTIFICATION OF CABLE SYSTEM:
	<u>'</u>	
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)

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

A	2040/2	
Accounting Period:	2018/2	FORM SA1-2E. PAGE 1b.
	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	WINDSTREAM OHIO INC	63211
	Instructions: List each separate community served by the cable system. A "community served by the cable system."	
D	"a separate and distinct community or municipal entity (including unincorporated condiscrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis as the "first community." Please use it as the first community on all future filings.  Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho	nmunities within unincorporated areas and including single, t will serve as a form of system identification hereafter known
Area Served	identified city.	onie parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	NEWARK	ОН
Community	PLAZA GARDENS	
	NEW DREX	
Add Rows as Necessary		

Accounting Period: 2018/2

FORM SA1-2E. PAGE 2.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

63211

# E

Name

#### Secondary Transmission Service: Subscribers and Rates

#### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

WINDSTREAM OHIO INC

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

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

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

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

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

BL	OCK 1		BLOCK 2				
	NO. OF			NO. OF			
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE		
Residential:							
<ul> <li>Service to first set</li> </ul>	200	17.00					
<ul> <li>Service to additional set(s)</li> </ul>							
<ul> <li>FM radio (if separate rate)</li> </ul>							
Motel, hotel							
Commercial							
Converter							
Residential							
Non-residential							
		1			•		

# F

#### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable	19.00	Motel, hotel		PPV	PP
<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial			
Fire protection		Pay cable			
•Burglar protection		Pay cable-add'l channel			
Installation: Residential		Fire protection			
First set		Burglar protection			
Additional set(s)		Other services:			
• FM radio (if separate rate)		Reconnect			
Converter		Disconnect			
		Outlet relocation			
		Move to new address			

Accounting Period: 2018/2 FORM SA1-2E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#

Name

WINDSTREAM OHIO INC

63211

# G

#### Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

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

**Substitute Basis Stations:** With respect to any distant stations carried by your cable system on a substitute program basis under 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.
- 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. *Do not* report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "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 its community of license. For example, WRC is channel 4 in Washington, D.C.

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

Add Rows as Necessary

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
wwho	53	N	COLUMBUS OH
WCMH	4	N	COLUMBUS OH
wosu	34	E	COLUMBUS OH
WTTE	28	N	COLUMBUS OH
WSYX	6	N	COLUMBUS OH
WBNS	10	N	COLUMBUS OH
WSFJ	51	N	COLUMBUS OH

rried by your cable syste CC rules and regulations .59(d)(2) and (4), 76.61( bstitute program basis, a abstitute Basis Stations sis under specific FCC r	TELEVISION entify every television station (including em during the accounting period, excelor in effect on June 24, 1981, permitting e)(2) and (4), or 76.63 (referring to 76. as explained in the next paragraph. So With respect to any distant stations of ules, regulations, or authorizations:	g translator stations and low power tele pt (1) stations carried only on a part-tim the carriage of certain network program.61(e)(2) and (4))]; and (2) certain static carried by your cable system on a subs	ne basis under na series and seri
General: In space G, iderried by your cable system CC rules and regulations .59(d)(2) and (4), 76.61(bestitute program basis, aubstitute Basis Stations is under specific FCC r	TELEVISION  entify every television station (including am during the accounting period, exception effect on June 24, 1981, permitting (e)(2) and (4), or 76.63 (referring to 76.63) explained in the next paragraph.  S: With respect to any distant stations caules, regulations, or authorizations:	pt (1) stations carried only on a part-time the carriage of certain network program .61(e)(2) and (4))]; and (2) certain station carried by your cable system on a substantial carried by your cable system on	vision stations) ne basis under ns [sections ons carried on a
General: In space G, iderried by your cable systematic content of the content of	entify every television station (including em during the accounting period, exce) in effect on June 24, 1981, permitting e)(2) and (4), or 76.63 (referring to 76. as explained in the next paragraph. So With respect to any distant stations calles, regulations, or authorizations:	pt (1) stations carried only on a part-time the carriage of certain network program .61(e)(2) and (4))]; and (2) certain station carried by your cable system on a substantial carried by your cable system on	ne basis under na series and seri
rried by your cable syste CC rules and regulations .59(d)(2) and (4), 76.61( bstitute program basis, a abstitute Basis Stations sis under specific FCC r	em during the accounting period, excel- in effect on June 24, 1981, permitting (e)(2) and (4), or 76.63 (referring to 76. as explained in the next paragraph. s: With respect to any distant stations of ules, regulations, or authorizations:	pt (1) stations carried only on a part-time the carriage of certain network program .61(e)(2) and (4))]; and (2) certain station carried by your cable system on a substantial carried by your cable system on	ne basis under na series and seri
ation was carried only or ist the station here, and sis. For further information blumn 1: List each station alticast stream associate /ETA-2" as the same on blumn 2: Give the chann license. For example, Wolumn 3: Indicate in each ucational station, by enter in independent multicast) in the meaning of these to blumn 4: Give the location	n a substitute basis. also in space I, if the station was carrion concerning substitute basis stations on's call sign. Do not report origination d with a station according to its over-the form. The left is channel 4 in Washington, D.C. in case whether the station is a networkering the letter "N" (for network), "N-M", "E" (for noncommercial educational), erms, see page (iv) of the general institution of each station. For U.S. stations, list	k station, an independent station, or a n " (for network multicast), "I" (for indepen , or "E-M" (for noncommercial educatior ructions in the paper SA1-2 form. st the community to which the station is	on some other ins. I, etc. Identify each multistream e air in its community concommercial ident), "I-M" nal multicast).
			4. LOCATION OF STATION
			<ul> <li>Jumn 4: Give the location of each station. For U.S. stations, list the community to which the station is c. For Mexican or Canadian stations, if any, give the name of the community with which the station is community.</li> <li>1. CALL SIGN</li> <li>2. B'CAST CHANNEL NUMBER</li> <li>3. TYPE OF STATION</li> </ul>

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

#### WINDSTREAM OHIO INC

63211

#### PRIMARY TRANSMITTERS: RADIO

In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were generally receivable by your cable system during the accounting period.

Н

Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the Copyright Office regulations on this point, see page (v) of the general instructions in the. paper SA1-2 form.

Primary Transmitters: Radio

- Column 1: Identify the call sign of each station carried.
- Column 2: State whether the station is AM or FM.
- **Column 3:** If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.

**Column 4:** Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

0411 010::		0/0		T 0411 01011	l	0.10	L 004TION 05 0T: T: 0:
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
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ounting Perio	nd: 2018/2							FORM	1 SA1-2E. PAGE 5
Nama	LEGAL NAME OF OWNER OF		TEM:					1 Ortic	SYSTEM ID#
	WINDSTREAM OHIO I	NC							63211
	SUBSTITUTE CARRIAG In General: In space I, ident substitute basis during the a explanation of the programm  1. SPECIAL STATEMEN  • During the accounting per broadcast by a distant stat Note: If your answer is "Not log in block 2.  2. LOG OF SUBSTITUTI In General: List each subs clear. If you need more spac Column 1: Give the title period, was broadcast by a	tify every nor accounting per normal that must reconcern to the concern to the co	nnetwork televireriod, under spet be included in the included	ision program, broadcast by secific present and former Fin this log, see page (v) of the TITUTE CARRIAGE on carry, on a substitute based by the second secon	y a distant star CC rules, reg he general ins asis, any nonr s "Yes," you r s wherever po	ulations, of structions in the structions in the structions in the structions in the structure in the struct	levision the levision the levision the their r	orization paper S on progr YES the progr meaning	ns. For a further A1-2 form.  Tam  X NO  ram  g is
	Column 3: Give the call Column 4: Give the broat the case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes. stated as "6:00–6:30 p.m."	ries like "mo Bulls."  m was broad sign of the s adcast static nadian static nth and day ve "5/7." les when the Example: a	vies" or "bask dcast live, ente station broadcon's location (fons, if any, the when your sy e substitute program carr	etball." List specific progra er "Yes." Otherwise enter i asting the substitute progra the community to which the community with which the stem carried the substitute ogram was carried by you ried by a system from 6:01	am titles, for e "No." ram. e station is lid e program. Us r cable syster 1:15 p.m. to 6	censed by entified). se numera m. List the 5:28:30 p.r	the Fals, wie times	ECC or, th the mass accurate accurate the second se	or in nonth ately
	to delete under FCC rules	and regulation	ons in effect d	uring the accounting perio	od; enter the I ler FCC rules	etter "P" i and regu	f the li llation	sted pro	
	to delete under FCC rules a was substituted for prograr effect on October 19, 1976	and regulation mming that y	ons in effect d our system w	uring the accounting periods as permitted to delete unc	od; enter the I der FCC rules WHE	letter "P" is and regu	f the li lation	isted pro s in	ogram 7. REASON FOR
	to delete under FCC rules a was substituted for prograr effect on October 19, 1976	and regulation mming that y	ons in effect d our system w	uring the accounting periods as permitted to delete unc	od; enter the I der FCC rules WHE	etter "P" is and regu N SUBST AGE OCC	f the li lation ITUT CURF	isted prosing in the second se	ogram
	to delete u was substi effect on C	inder FCC rules ituted for prograr October 19, 1976	inder FCC rules and regulatifitated for programming that you could be supported by the support of the support o	inder FCC rules and regulations in effect dituted for programming that your system work object 19, 1976.  SUBSTITUTE PROGRAM 2. LIVE? 3. STATION'S	inder FCC rules and regulations in effect during the accounting periodituted for programming that your system was permitted to delete unconcident 19, 1976.  SUBSTITUTE PROGRAM  2. LIVE? 3. STATION'S	inder FCC rules and regulations in effect during the accounting period; enter the lituted for programming that your system was permitted to delete under FCC rules October 19, 1976.  WHE SUBSTITUTE PROGRAM CARRI COF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH	inder FCC rules and regulations in effect during the accounting period; enter the letter "P" if ituted for programming that your system was permitted to delete under FCC rules and regulations 19, 1976.  WHEN SUBSTITUTE PROGRAM  2. LIVE? 3. STATION'S  SOF PROGRAM  2. LIVE? 3. STATION'S  SOF PROGRAM  CARRIAGE OCCURRENCE OF PROGRAM  CARRIAGE OCCURRENCE OCCURENCE OCCURRENCE OCCURRENCE OCCURRENCE OCCURRENCE OCCURRENCE OCCUR	inder FCC rules and regulations in effect during the accounting period; enter the letter "P" if the lituted for programming that your system was permitted to delete under FCC rules and regulation Dctober 19, 1976.  WHEN SUBSTITUT  SUBSTITUTE PROGRAM  2. LIVE? 3. STATION'S  5. MONTH  6. TIMES	SUBSTITUTE PROGRAM  SOF PROGRAM  2. LIVE? 3. STATION'S  SOF PROGRAM  CONTROL  SUBSTITUTE  CARRIAGE OCCURRED  5. MONTH  6. TIMES

Accounting Period:	LEGAL NAME OF OWNER OF CABLE SYSTEM:		1-2E. PAGE YSTEM ID						
Name	WINDSTREAM OHIO INC	J	6321						
<b>K</b> Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a 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.	ission service amount, see	<b>0,400.00</b> ss receipts)						
_	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 than or equal to \$30.  Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600.  See page (vi) of the general instructions located in the paper SA1-2 form for more information.	263,800							
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS								
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00	this six-mon							
	Line 1. Royalty fee for accounting period	\$	52.00						
	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	\$	52.00						
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)							
	1. Base amount under statutory formula	_							
	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								
	5. Enter the amount from line 3								
	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 (but less than \$527	,600)							
	Enter the amount of gross receipts from space K	_							
	2. Base amount under statutory formula								
	3. Subtract line 2 from line 1	_							
	4. Multiply line 3 by .01								
	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								
	FILING FEE AND TOTAL REMITTANCE DUE								
Filing Fee and Total Remittance	Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00							
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00							
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00						
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		nts!						

Accounting Period:	2018/2						FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER O						SYSTEM ID# 63211
M Channels	CHANNELS Instructions: You must g to its subscribers, and (2)					elevision broadcast stations ecounting period.	
	Enter the total number     system carried television						7
	Enter the total number     on which the cable syste     and nonbroadcast serving	em carried television	broadcast s	tations			120
N Individual to Be Contacted	INDIVIDUAL TO BE CON we can contact about this			MATION IS NEEDED (Ide	entify an in	dividual to whom	
for Further Information	Name PAM	HENDRIX				Telephone	706.776.4618
	(Number	communicati , street, rural route, apartr DWIN GA 30511 m, state, zip)	ment, or suite n	<b>/D</b> number)			
	Email	sandra.blade@	windstream	1.com		Fax (optional)	
	CERTIFICATION (This sta	tement of account m	ust be certifi	ed and signed in accorda	ance with C	Copyright Office regulations)	
O Certification	• I, the undersigned, hereb	y certify that (Check o	one,but only	one, of the boxes.)			
	(Owner other t	han corporation or p	artnership)	I am the owner of the cab	le system a	as identified in line 1 of space	B; or
				nership) I am the duly au a corporation or partnersh		gent of the owner of the cable	system as identified
	X (Officer or par in line 1 of s		if a corporati	on) or a partner (if a partr	ership) of t	the legal entity identified as ow	vner of the cable system
	I have examined the state are true, complete, and co [18 U.S.C., Section 1001(**)]	rrect to the best of my				ements of fact contained herein de in good faith.	n
			Χ	/S/ TIM	OTHY P	LOKEN	
				ectronic signature on the lir cure using an "/s/ signature			
		Typed or printed	d name:	FIMOTHY P LOKE	١		
		Title:		OR-REGULATOR\		RTING	
		Date:				FEBRUARY 25, 2019	

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.

counting Period: 2018/2	FORM SA1-2E. PAGE 8.
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
INDSTREAM OHIO INC	63211
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	P Special Statement Concerning Gross Receipts Exclusion
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?  X NO  YES. Enter the total here and list the satellite carrier(s) below	
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
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	
* To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner Address	
ID number  First community served  Accounting period	

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