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

1

Return completed workbook

STATEME	ATEMENT OF ACCOUNT		FOR COPYRIGHT	T OFFICE USE ONLY	by email to:		
		ansmissions by	DATE RECEIVED	AMOUNT			
Cable Syste	ems (S	Short Form)			<u>coplicsoa@loc.gov</u>		
				\$	For additional information, contact the U.S. Copyright		
General instru			08/16/2019		Office Licensing Division at: Tel: (202) 707-8150		
in the first tab	of this	workbook		ALLOCATION NUMBER	Tel. (202) 707-8150		
Α							
A	ACC	OUNTING PERIOD COVERED E	BY THIS STATEMENT: (YY)	/Y/(Period))			
			1				
		2019/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31			
		20101	Barcode Data Filing Period (optional -	see instructions)			
		20191		,			
Accounting Period							
		Instructions:					
В		Give the full legal name of the owner of th		ary of another corporation, give the full corpo	orate title		
Б		of the subsidiary, not that of the parent co	prporation.				
Owner		List any other name or names under which	the owner conducts the business of the	cable system.			
				e last day of the accounting period should sub	bmit a		
		single statement of account and royalty fe	e payment covering the entire accountin	g period.	3242		
		Check here if this is the system's first filing	. If not, enter the system's ID number as	signed by the Licensing Division.	5242		
		LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM				
		TDS Broadband Service LLC					
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)				
		Baja Broadband					
		MAILING ADDRESS OF OWNER OF	CABLE SYSTEM				
		525 Junction Rd.					
		(Number, street, rural route, apartment, or suite no Madison, WI 53717-2152	umber)				
		(City, town, state, zip)					
С				ify the business and operation of the s system, if different from the address g			
System	1	IDENTIFICATION OF CABLE SYSTEM:					
		MAILING ADDRESS OF CABLE SYSTEM					

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.

(Number, street, rural route, apartment, or suite number)

2

(City, town, state, zip code)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Nume	TDS Broadband Service LLC	3242
D	Instructions: List each separate community served by the cable system. A "c "a separate and distinct community or municipal entity (including unincorpo discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community th as the "first community." Please use it as the first community on all future fi	rated communities within unincorporated areas and including single, at you list will serve as a form of system identification hereafter known lings.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or identified city.	mobile nome parks should be reported in parentneses below the
	CITY OR TOWN	STATE
First	ALPINE	ТХ
Community		
ld Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM						FORM SA1	
Name	TDS Broadband Service								324
_	SECONDARY TRANSMISSION		IBSCR	IBERS AND R	ATES				
E	In General: The information in s					y transmission	service of	he cable	
	system, that is, the retransmission								
Secondary	about other services (including p						those exist	ing on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both	`				,	hle system	broken	
scribers and	down by categories of secondar	•					,		
Rates	each category by counting the n			•••		•		charged	
	separately for the particular serv							na and the	
	Rate: Give the standard rate of unit in which it is generally billed	-						-	
	category, but do not include disc						is within a		
	Block 1: In the left-hand block					ondary transmi	ssion servi	ce that cable	
	systems most commonly provide							0,	
	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	has rate catego	ories fo	r secondary tra	nsmission				
	printed in block 1 (for example, t					,		, 0	
	with the number of subscribers a sufficient.	and rates, in the	e right-l	hand block. A t	wo- or thre	e-word descript	tion of the s	service is	
		DCK 1					BLOCK	(2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIBI		RATE	CATE	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RATE
	Residential:	CODOCIAD	LING	TUTE	0,111			COBCOLUBEILO	i o ti i
	Service to first set		288	\$34.74/Mo.					
	Service to additional set(s)								
	• FM radio (if separate rate)								
	Motel, hotel		44	23.20-\$35.15					
	Commercial								1
	Converter								
	Residential		78	\$5.95/Mo.					1
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	S				
F	In General: Space F calls for ra	•	,		•	• •			
	not covered in space E, that is, t service for a single fee. There ar								
Services	furnished at cost or (2) services		,		0		0.	·	
Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the								
ransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that							were not	
Rates	listed in block 1 and for which a	• •			-	-			
	brief (two- or three-word) descrip	otion and includ	de the r	ate for each.					
			ר אר 1					BLOCK 2	
		BLOO							
	CATEGORY OF SERVICE			GORY OF SER	VICE	RATE	CATEGO	ORY OF SERVICE	RATE
	Continuing Services:	RATE	CATE(ation: Non-res		RATE	CATEGO	DRY OF SERVICE	RATE
	Continuing Services: • Pay cable		CATE Install • Mo	ation: Non-res otel, hotel			CATEGO	DRY OF SERVICE	RATE
	Continuing Services: • Pay cable • Pay cable—add'l channel	RATE	CATE Install • Mo • Co	ation: Non-res otel, hotel mmercial		RATE \$0-\$99.95	CATEGO	DRY OF SERVICE	RATE
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	RATE	CATEC Install • Mo • Co • Pa	ation: Non-res otel, hotel mmercial y cable	idential		CATEGO	DRY OF SERVICE	RATE
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	RATE	CATEC Install • Mo • Co • Pa • Pa	ation: Non-res otel, hotel mmercial y cable y cable-add'l ch	idential		CATEGO	DRY OF SERVICE	RATE
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	RATE 7.40-19.99	CATEC Install • Mo • Co • Pa • Pa • Fire	ation: Non-res otel, hotel mmercial y cable y cable-add'l ch e protection	i dential nannel		CATEGO	DRY OF SERVICE	RATE
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	RATE 7.40-19.99 0-49.95	CATEC Install • Mo • Co • Pa • Pa • Fird • Bu	ation: Non-res tel, hotel mmercial y cable y cable-add'l ch e protection rglar protection	i dential nannel		CATEGO	DRY OF SERVICE	RATE
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	RATE 7.40-19.99 0-49.95	CATEC Install • Mo • Co • Pa • Pa • Firr • Bu Other	ation: Non-res ttel, hotel mmercial y cable- y cable-add'l ch e protection rglar protection services:	i dential nannel	\$0.\$99.95	CATEGO	DRY OF SERVICE	RATE
	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)	RATE 7.40-19.99 0-49.95	CATEC Install • Mo • Co • Pa • Fin • Bu Other • Re	ation: Non-res ttel, hotel mmercial y cable y cable-add'l ch e protection rglar protection services: connect	i dential nannel			DRY OF SERVICE	RATE
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	RATE 7.40-19.99 0-49.95	CATEC Install • Mo • Co • Pa • Pa • Firr • Bu Other • Re • Dis	ation: Non-res titel, hotel mmercial y cable y cable-add'l ch e protection rglar protection services: connect sconnect	i dential nannel	\$0-\$99.95 		DRY OF SERVICE	RATE
	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)	RATE 7.40-19.99 0-49.95	CATEC Install • Mo • Co • Pa • Pa • Fin • Bu Other • Re • Dis • Ou	ation: Non-res ttel, hotel mmercial y cable y cable-add'l ch e protection rglar protection services: connect	idential nannel	\$0.\$99.95		DRY OF SERVICE	RATI

	LEGAL NAME OF OWNER O)F CABLE SYSTEM:		SYSTE
Name	TDS Broadband Serv			
	PRIMARY TRANSMITTERS:			
G Primary Transmitters: Television	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC r	dentify every television station (including tra em during the accounting period, <i>except</i> (s in effect on June 24, 1981, permitting the (e)(2) and (4), or 76.63 (referring to 76.61(as explained in the next paragraph. is: With respect to any distant stations carr rules, regulations, or authorizations: re in space G—but do list it in space I (the	 stations carried only on a part carriage of certain network prog (e)(2) and (4))]; and (2) certain st ried by your cable system on a st 	-time basis under grams [sections ations carried on a ubstitute program
	station was carried <i>only</i> or • List the station here, and basis. For further informati		both on a substitute basis and al ee page (v) of the general instruc	so on some other ctions.
	multicast stream associate "WETA-2" as the same on Column 2: Give the chann	ed with a station according to its over-the-a n the form. nel number the FCC assigned to the televis	air designation. For example, rep	port multistream
	Column 3: Indicate in each educational station, by ent (for independent multicast)	WRC is channel 4 in Washington, D.C. ch case whether the station is a network sta- tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or '	or network multicast), "I" (for inde "E-M" (for noncommercial educa	pendent), "I-M"
	Column 4: Give the location	terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the	he community to which the statio	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KMID	2.1	N	Midland, TX
	KOSA	7.1	N	Odessa, TX
	KOSA-DT2	7.2	N-M	Odessa, TX
	KOSA-DT3	7.3	N-M	Odessa, TX
d Rows as Necessary	KPEJ	24.1	I	Odessa, TX
	KPEJ-DT2	24.2	ı I-M	Odessa, TX
		9.1	N	Odessa, TX
	KWES	911		Uuuuu,
		9.2	N-M	Odessa, TX
	KWES-DT2 KUPB			Odessa, TX
	KWES-DT2	9.2 18.1		Odessa, TX Midland, TX
	KWES-DT2 KUPB	9.2	N-M I	Odessa, TX Midland, TX Midland, TX
	KWES-DT2 KUPB KUPB-DT2	9.2 18.1 18.2	N-M I I-M	Odessa, TX Midland, TX
	KWES-DT2 KUPB KUPB-DT2 KENW	9.2 18.1 18.2 3.1	N-M I I-M	Odessa, TX Midland, TX Midland, TX Portales, NM
	KWES-DT2 KUPB KUPB-DT2 KENW KMLM	9.2 18.1 18.2 3.1 42.1	N-M I I-M	Odessa, TX Midland, TX Midland, TX Portales, NM Odessa, TX
	KWES-DT2 KUPB KUPB-DT2 KENW KMLM	9.2 18.1 18.2 3.1 42.1	N-M I I-M	Odessa, TX Midland, TX Midland, TX Portales, NM Odessa, TX
	KWES-DT2 KUPB KUPB-DT2 KENW KMLM	9.2 18.1 18.2 3.1 42.1	N-M I I-M	Odessa, TX Midland, TX Midland, TX Portales, NM Odessa, TX
	KWES-DT2 KUPB KUPB-DT2 KENW KMLM	9.2 18.1 18.2 3.1 42.1	N-M I I-M	Odessa, TX Midland, TX Midland, TX Portales, NM Odessa, TX
	KWES-DT2 KUPB KUPB-DT2 KENW KMLM	9.2 18.1 18.2 3.1 42.1	N-M I I-M	Odessa, TX Midland, TX Midland, TX Portales, NM Odessa, TX
	KWES-DT2 KUPB KUPB-DT2 KENW KMLM	9.2 18.1 18.2 3.1 42.1	N-M I I-M	Odessa, TX Midland, TX Midland, TX Portales, NM Odessa, TX
	KWES-DT2 KUPB KUPB-DT2 KENW KMLM	9.2 18.1 18.2 3.1 42.1	N-M I I-M	Odessa, TX Midland, TX Midland, TX Portales, NM Odessa, TX
	KWES-DT2 KUPB KUPB-DT2 KENW KMLM	9.2 18.1 18.2 3.1 42.1	N-M I I-M	Odessa, TX Midland, TX Midland, TX Portales, NM Odessa, TX
	KWES-DT2 KUPB KUPB-DT2 KENW KMLM	9.2 18.1 18.2 3.1 42.1	N-M I I-M	Odessa, TX Midland, TX Midland, TX Portales, NM Odessa, TX
	KWES-DT2 KUPB KUPB-DT2 KENW KMLM	9.2 18.1 18.2 3.1 42.1	N-M I I-M	Odessa, TX Midland, TX Midland, TX Portales, NM Odessa, TX

				OVOTE	
Name	LEGAL NAME OF OWNER OF			SYSTE	
	TDS Broadband Servi	ce LLC			324
	PRIMARY TRANSMITTERS:	TELEVISION			
0	In General: In space G, ider	ntify every television station (including	g translator stations and low power tele	evision stations)	
G		o o i i	ot (1) stations carried only on a part-tin		
			the carriage of certain network program		
Primary ransmitters:)(2) and (4), or 76.63 (reterring to 76. explained in the next paragraph.	61(e)(2) and (4))]; and (2) certain static	ons carried on a	
Television			carried by your cable system on a subs	stitute program	
	basis under specific FCC rul	es, regulations, or authorizations:			
			the Special Statement and Program Lo	og)—if the	
	station was carried only on a				
		•	ed both on a substitute basis and also (s, see page (v) of the general instructio		
		5	program services such as HBO, ESPN		
	multicast stream associated	with a station according to its over-th	ne-air designation. For example, report	t multistream	
	"WETA-2" as the same on th			, .,	
		RC is channel 4 in Washington, D.C.	levision station for broadcasting over th	he air in its community	
			station, an independent station, or a r	noncommercial	
			(for network multicast), "I" (for indeper		
			or "E-M" (for noncommercial education		
	(for independent mullicast),	E (lor noncommercial educational),	OF E-INF (IOF HORICOTTIME CIAL EQUCATION	lai mullicast).	
				lai mulucast).	
	For the meaning of these ter Column 4: Give the location	ms, see page (iv) of the general instr of each station. For U.S. stations, lis		licensed by the	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location	ms, see page (iv) of the general instr of each station. For U.S. stations, lis	ructions in the paper SA1-2 form. st the community to which the station is	licensed by the	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	
	For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ms, see page (iv) of the general instr of each station. For U.S. stations, lis ian stations, if any, give the name of	ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	s licensed by the s identified.	

TDS Broadb	F OWNER OF		ISIEM:					SYSTEM I 32
	t every radio	station ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) on the basis of For detailed inf paper SA1-2 fo Column 1: I Column 2: S Column 3: I signal, indicate Column 4: C) it is carried b monitoring, to formation about mm. dentify the cal State whether f the radio star this by placin Give the statio	by the system be receil at the Co I sign of the static tion's sig g a check n's locati	II-Band FM Carriage: Under C stem whenever it is received a ived 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 this point, see pa ed by the cable s he station is licens	adend, and (2 enna, during c ge (v) of the g ystem as a se sed by the FC) it can ertain st eneral ii parate :	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	
				CALL SIGN		5/0	LOCATION OF STATION	
KALP	FM	<u>×</u>	Alpine, TX					
	+							
							·	
							·	
							·	
				F			·	

Accounting Perio	od: 2019/1						FOR	M SA1-2E. PAGE 5.
Nama	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	TDS Broadband Servi	ce LLC						3242
	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	NT AND PROGRAM LC	G			
	In General: In space I, ident	ifv everv no	nnetwork televi	<i>ision program</i> . broadcast b	v a <i>distant</i> sta	tion. that vo	our cable svs	tem carried on a
	substitute basis during the a							
Substitute	explanation of the programm	ning that mu	st be included	in this log, see page (v) of t	the general in:	structions ir	the paper S	A1-2 form.
Carriage:	1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE				
Special Statement and	 During the accounting per 	riod, did you	ur cable syster	m carry, on a substitute ba	asis, any noni	network tel	evision prog	ram
Program Log	broadcast by a distant sta	tion?					YES	× NO
	Note: If your answer is "No	" loovo tho	roct of this no	ao blank if your answor i	с "Voc " уоц и	- must comp	-	
	-	, leave life	rest of this pa	ige blatik. It your allswel t	s res, your	nusi comp	iele li le pi o	Jian
	log in block 2. 2. LOG OF SUBSTITUTI		MS					
	In General: List each subs			ate line. Use abbreviation	s wherever p	ossible. if t	heir meanin	a is
	clear. If you need more spa					,		5
				vision program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor							
	"NBA Basketball: 76ers vs.					, -	,	
				er "Yes." Otherwise enter				
				asting the substitute prog the community to which th		concod by	the ECC or	in
	the case of Mexican or Car							
				stem carried the substitute			ls, with the r	nonth
	first. Example: for May 7 gi							
	to the nearest five minutes.			ogram was carried by you				ately
	stated as "6:00–6:30 p.m."		a program can	ned by a system norm 0.0	1. 15 p.m. to t	.20.30 p.n		
		er "R" if the	listed program	n was substituted for prog	ramming that	t your syste	em was <i>requ</i>	iired
	to delete under FCC rules							ogram
	was substituted for programe ffect on October 19, 1976	• •	your system w	as permitted to delete und	der FCC rules	s and regul	ations in	
		•			- 1			
					WHE	N SUBST	ITUTE	
	S		E PROGRAM	1		AGE OCC		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES — TO	BEEEnon
		100 01 110	0,122 01011				10	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
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							_	
							-	

Accounting Period:	2019/1	FORM SA	1-2E. PAGE 6.
	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S١	STEM ID#
Name	TDS Broadband Service LLC		3242
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmi (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.	ssion service mount, see	5,815.46 ss receipts)
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 than or equal to \$2 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 formation.	63,800	
	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 t accounting period is \$52.00	his 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 \$ 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		
	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)	
	1. 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	1. 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 informati		nts!

Accounting Period:	2019/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: TDS Broadband Service LLC	SYSTEM ID# 3242
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 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 on which the cable system carried television broadcast stations and nonbroadcast services	13 289
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name Stephanie Weber Telephone	(608) 664-4721
	Address 525 Junction Rd (Number, street, rural route, apartment, or suite number) Madison, WI 53717 (City, town, state, zip) Email stephanie.weber@tdstelecom.com Fax (optional)	
O Certification	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) 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 in line 1 of space (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ov in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herei are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] X /s/ Amanda K. Moore Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith) Typed or printed name: Amanda K. Moore Title: Assistant Treasurer (Title of official position held in corporation or partnership)	system as identified vner of the cable system
	Date: 16 August 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.

ounting Period: 2019/1	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
S Broadband Service LLC	324
 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? X NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address	
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 Assessmen
^	-
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
x	-
x days Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here x in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$	-
Line 3 Multiply line 2 by the number of days late and enter the sum here - Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$ - - (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf.	-
Line 3 Multiply line 2 by the number of days late and enter the sum here - k - <td>-</td>	-
x	-
x	
x	
x	
x	

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