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 COPYRIGHT	OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u>
General instructions are located in the first tab of this workbook	08/25/2020	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

A	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		20201 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
		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 number)
		Madison, WI 53717-2152 (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		IDENTIFICATION OF CABLE SYSTEM:
	1	
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)
	ı	\mathbf{L}_{i} , \mathbf{v}_{i} , \mathbf{v}_{i} , \mathbf{v}_{i}

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	TDS Broadband Service LLC	3242
D	Instructions: List each separate community served by the cable system. A "a separate and distinct community or municipal entity (including unincor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community as the "first community." Please use it as the first community on all futur Note: Entities and properties such as hotels, apartments, condominiums,	porated communities within unincorporated areas and including single, that you list will serve as a form of system identification hereafter known e filings.
Served	identified city.	
	CITY OR TOWN	STATE
First	Alpine	TX
Community		
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:						SYS	TEM ID
Name	TDS Broadband Service	LLC							324
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmission about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the m separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed	pace E should on of television way cable) in sp I (June 30 or D n blocks in spa y transmission umber of billing ice at the rate harged for eac	cover all and radi pace F, no ecember ce E call service. gs in that indicated h catego	categories of s o broadcasts by ot here. All the 31, as the case for the number In general, you category (the n —not the numb ry of service. In	econdary y your sy facts you e may be of subsc can com umber o ber of set clude bo	stem to subscri state must be t). ribers to the cal pute the number f persons or org s receiving serv th the amount of	bers. Give hose exist ble system er of subsc janizations icce). of the charg	information ing on the , broken ribers in charged ge and the	
	category, but do not include disc Block 1: In the left-hand block systems most commonly provide that applies to your system. Note categories, that person or entity subscriber who pays extra for ca first set" and would be counted or Block 2: If your cable system printed in block 1 (for example, t with the number of subscribers a sufficient.	in space E, the to their subsc where an in should be coun- ble service to once again und has rate catego iers of services	e form lis ribers. G dividual c nted as a additiona er "Servi ories for s that incl	ts the categorie ive the number or organization i subscriber in e I sets would be ce to additional secondary trans ude one or mor	of subsc s receiving ach appl included set(s)." semission re second	ribers and rate ng service that icable category in the count ur service that are dary transmission	for each lis falls under . Example: der "Servi different f ons), list th	sted category different a residential ce to the rom those em, together	
	BLO	DCK 1					BLOCI		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATI	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RATI
	Residential: • Service to first set		245	25.00	0,111				
	Service to additional set(s)								
	 FM radio (if separate rate) 								
	Motel, hotel		44 2:	3.20-\$35.15					
	Commercial								
	Converter		~~	AE 05/34					
	Residential		63	\$5.95/Mo.					
	Non-residential								
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip	e (not subscrit hose services e two exceptio or facilities furr it in which it is rate column. e charged by t your cable sys separate charge	ber) inforr that are r ns: you c nished to usually t he cable stem furn je was m	mation with resp not offered in co lo not need to g nonsubscribers billed. If any rate system for eac ished or offered ade or establish	ombinatio live rate i s. Rate in es are ch h of the a d during t	n with any seco information con formation shou arged on a vari applicable servio he accounting	ondary tran cerning (1) ld include l able per-pi ces listed. ceriod that	smission services ooth the rogram basis, were not	
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE		ORY OF SERV		RATE	CATEG	ORY OF SERVICE	RATI
	Continuing Services: Pay cable	7 40 40 00		tion: Non-resid	lential				
	• Pay cable—add'l channel	7.40-19.99		el, hotel Imercial		\$0 - \$99.95			
	Fire protection		• Pay			<i>vo vooloo</i>			
	•Burglar protection		-	cable-add'l cha	nnel				
	Installation: Residential		• Fire	protection					
	• First set	0-49.95	• Burg	lar protection					
	 Additional set(s) 	0-49.95	Other s	ervices:					
	• FM radio (if separate rate)			onnect		0-25			
	Converter			onnect		10 00 00 00			
	1		 Outl 	et relocation		19.98-39.96			
				e to new addres	20				

Nama	LEGAL NAME OF OWNER O	IF CABLE SYSTEM:		SYSTEM
Name	TDS Broadband Serv	vice LLC		
	PRIMARY TRANSMITTERS:	TELEVISION		
G	carried by your cable syste FCC rules and regulations	dentify every television station (including tr em during the accounting period, <i>except</i> (s in effect on June 24, 1981, permitting the	(1) stations carried only on a part e carriage of certain network prog	t-time basis under grams [sections
Primary ransmitters: Television	76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations	(e)(2) and (4), or 76.63 (referring to 76.61) as explained in the next paragraph. s: With respect to any distant stations carr rules, regulations, or authorizations:	(e)(2) and (4))]; and (2) certain st	tations carried on a
	• Do not list the station her station was carried only or	ere in space G—but do list it in space I (the		
	basis. For further information Column 1: List each station	ion concerning substitute basis stations, so on's call sign. <i>Do not</i> report origination pro ed with a station according to its over-the-a	see page (v) of the general instructors and services such as HBO, ES	ctions. SPN, etc. Identify each
	Column 2: Give the chann of license. For example, W Column 3: Indicate in each	nel number the FCC assigned to the televi NRC is channel 4 in Washington, D.C. ch case whether the station is a network st	tation, an independent station, or	a noncommercial
	(for independent multicast) For the meaning of these to Column 4: Give the location	tering the letter "N" (for network), "N-M" (for i), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct on of each station. For U.S. stations, list th adian stations, if any, give the name of the	"E-M" (for noncommercial educa tions in the paper SA1-2 form. the community to which the station	tional multicast). n is licensed by the
	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	7.1		
Rows as Necessary			N-M	Odessa, TX
	KOSA-DT3	7.3	<u>N-M</u>	Odessa, TX
		24.1		Odessa, TX
	KPEJ-DT2	24.2	I-M	Odessa, TX
	KWES	9.1	N	Odessa, TX
	KWES-DT2	9.2	N-M	Odessa, TX
	КИРВ	18.1	I	Midland, TX
	KUPB-DT2	18.2	I	Midland, TX
	KUPB-DT2 KENW	18.2 3.1	I I-M E	Midland, TX Portales, NM
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX
	KUPB-DT2 KENW	18.2 3.1		Midland, TX Portales, NM
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX
	KUPB-DT2 KENW KMLM	18.2 3.1 42.1		Midland, TX Portales, NM Odessa, TX

ounting Period	: 2020/1			FORM SA1-2E. PA
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name	TDS Broadband Serv	ce LLC		33
	PRIMARY TRANSMITTERS:	TELEVISION		
G	carried by your cable system	n during the accounting period, except	translator stations and low power tele of (1) stations carried only on a part-tin	ne basis under
Primary ransmitters: Television	76.59(d)(2) and (4), 76.61(e substitute program basis, a	e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph.	he carriage of certain network progran 61(e)(2) and (4))]; and (2) certain statio arried by your cable system on a subs	ons carried on a
	basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on	les, regulations, or authorizations: e in space G—but do list it in space I (a substitute basis.	the Special Statement and Program Lo	pg)—if the
	basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on t Column 2: Give the channe of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio	n concerning substitute basis stations i's call sign. <i>Do not</i> report origination I with a station according to its over-th he form. I with a station according to its over-th RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-M" "E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis	ed both on a substitute basis and also of , see page (v) of the general instructio program services such as HBO, ESPN e-air designation. For example, report evision station for broadcasting over th station, an independent station, or a r (for network multicast), "I" (for indeper or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station is the community with which the station is	ns. N, etc. Identify each t multistream ne air in its community noncommercial ndent), "I-M" nal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

EGAL NAME O	F OWNER OF (CABLE SY	(STEM:					SYSTEM I
TDS Broadb								32
		B 4 B 16						
	t every radio s	station ca	arried on a separate and disc nerally receivable by your cal					н
eceivable if (1) on the basis of	it is carried by monitoring, to	y the sys be recei	I-Band FM Carriage: Under tem whenever it is received a ved at the headend, with the pyright Office regulations on	at the system's he system's FM ante	adend, and (2 enna, during c	2) it can ertain st	be expected, ated intervals.	Primary Transmitters Radio
oaper SA1-2 fo Column 1: k Column 2: S Column 3: lf	rm. dentify the call State whether f f the radio stat	l sign of the static ion's sig	each station carried. on is AM or FM. nal was electronically process		,			
Column 4: C	Give the station	n's locati	k mark in the "S/D" column. on (the community to which t the community with which the			C or, in	the case of	
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
KALP	FM	x	Alpine, TX					

Accounting Perio								FORM	M SA1-2E. PAGE 5.
Name	LEGAL NAME OF OWNER OF		TEM:						SYSTEM ID#
Name	TDS Broadband Servi	ce LLC							3242
	SUBSTITUTE CARRIAG	E: SPECIA		NT AND PROGRAM LO	G				
Substitute	In General: In space I, ident substitute basis during the a explanation of the programm	iccounting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or a	uthoriz	ations.	For a further
Carriage:	1. SPECIAL STATEMEN								
Special	 During the accounting per 				is, any nonnet	work telev	ision p	rogram	I
Statement and Program Log	broadcast by a distant sta	tion?					Y	'ES	X NO
r rogram Log	Note: If your answer is "No	" leave the	rest of this nad	e blank. If your answer is '	"Yes " vou mu	ist complet		-	
	log in block 2.	, leave the	rescor triis pag	je blatik. Il your answer is	res, you mu	ist complet	e uie p	Jografi	1
	2. LOG OF SUBSTITUTI	E PROGRA	MS						
	In General: List each subst	titute progra	m on a separa		wherever pos	sible, if the	ir mea	ning is	
	clear. If you need more spa				program") the	t during th		untina	
	period, was broadcast by a			ision program ("substitute ur cable svstem substitute					ion
	under certain FCC rules, re	gulations, o	r authorizations	s. See page (v) of the gene	eral instruction	ns for furth	er info	rmation	
	Do not use general categor "NBA Basketball: 76ers vs.	ies like "mov	vies" or "baske	tball." List specific program	n titles, for exa	ample, "I Lo	ove Lu	cy" or	
			lcast live. ente	r "Yes." Otherwise enter "N	No."				
	Column 3: Give the call	sign of the s	station broadca	sting the substitute progra	ım.				
	Column 4: Give the broat the case of Mexican or Car			e community to which the			e FCC	or, in	
				tem carried the substitute			with th	ne mon	th
	first. Example: for May 7 giv	ve "5/7."							
	Column 6: State the time	es when the	substitute pro	gram was carried by your o	cable system.	List the tir	nes ac	curatel	У
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	program carrie	ed by a system from 6:01:	15 p.m. to 6:2	8:30 p.m. s	snoula	be	
		er "R" if the	listed program	was substituted for progra	amming that y	our system	was <i>i</i>	required	d
	to delete under FCC rules a			المجابيجين بمجافيين وجواف وجاف				d progra	am
	Iwas substituted for program								
			our system wa	s permitted to delete unde	r FCC rules a	nd regulati	ons in		
	effect on October 19, 1976.		our system wa		r FCC rules a	nd regulati	ons in		
	effect on October 19, 1976.			s permitted to delete unde	WHE	N SUBST	ITUTE		
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI	N SUBST	ITUTE		7. REASON FOR DELETION
	effect on October 19, 1976.			s permitted to delete unde	WHE	N SUBST	ITUTE		
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	
	effect on October 19, 1976.	SUBSTITUT	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRE	ED	

Accounting Period:	2020/1 FORM SA1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID
	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. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see 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.
	COPYRIGHT ROYALTY FEE
L 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 \$263,800 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.
	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 this six-mon accounting period is \$52.00
	Line 1. Royalty fee for accounting period \$ 52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8
	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 \$137,100)
	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
	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 \$ 263,800.00
	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
	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 Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 67.00
	EFT Trace # or TRANSACTION ID #
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights. See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.

Name	Accounting Period:	2020/1		FORM SA1-2E. PAGE 7
M Crosses Instructions: You must pipe (1) the number of channels on which the cable system cannel delowises baranets during the accounting period. 13 Crosses 1 1 M Construction 13 Crosses 288	Name			SYSTEM ID# 3242
or which the cable system carried television broadcast stations 288 N MONUDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (dontify an individual to whom we can contrast advance) Individual for Further Name Stephanie Weber Individual for Further Name Stephanie Weber Address S25 Junction Rd Mathematic Stephanie Weber Telephone (609) 664-4721 Address S25 Junction Rd Mathematic Stephanie Weber Fax (optional) Mathematic Stephanie S		Instructions: to its subscrib 1. Enter the to	bers, and (2) the cable system's total number of activated channels during the accounting period.	13
Individual in the contract about this statement of account.) Individual in the contract about this statement of account.) Individual in the contract about this statement of account.) Address Statution Rd Address Statution Rd Matters Statution Rd		on which the	e cable system carried television broadcast stations	288
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(b) Email Inance@Itdstelecom.com P CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) • 1, the undersigned, hereby certify that (Check one, but only one, of the boxes.) • (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or • (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B; or • (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B; • (Officer or partner] I am on officer (if a corporation) or a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. • I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belef, and are made in good fath. I U.S.C., Section 1001(1980) Were or printed name: Sharon V. Tisdale The or printed name: Sharon V. Tisdale The: Cestistant Treesurer (The of indicapeation the in corporation or partnership)		Address		
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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: Sharon V. Tisdale Title: Assistant Treasurer (Title of official position held in corporation or partnership)		are true, comp	blete, and correct to the best of my knowledge, information, and belief, and are made in good faith.	
Typed or printed name: Sharon V. Tisdale Title: Assistant Treasurer (Title of official position held in corporation or partnership)			X /s/ Sharon V. Tisdale	
Title: Assistant Treasurer (Title of official position held in corporation or partnership)				
(Title of official position held in corporation or partnership)			Typed or printed name: Sharon V. Tisdale	
Date: August 25, 2020				
			Date: August 25, 2020	

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 the 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 telephol 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 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 t completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law

unting Period: 2020/1	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
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? 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.	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 Assessme
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
x	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
x	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here - x	Interest Assessme
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