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

SA1-2E Short Form

Return completed workbook by email to:

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 3/1/2021 \$ ALLOCATION NUMBER

coplicsoa@loc.gov

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

Α	ACCO	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			
В		Instructions: 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.	30530
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		MEDIACOM SOUTHEAST LLC (BURLINGTON, KS)	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		ONE MEDIACOM WAY	
		(Number, street, rural route, apartment, or suite number)	
		MEDIACOM PARK, NY 10918	
		(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 s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in	
System	4	IDENTIFICATION OF CABLE SYSTEM:	
	1	MEDIACOM SOUTHEAST LLC (BURLINGTON, KS)	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	P.O. BOX 249	
	∠	(Number, street, rural route, apartment, or suite number)	
		EXCELSIOR SPRINGS, MO 64024	
		(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 sufficiency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
	MEDIACOM SOUTHEAST LLC (BURLINGTON, KS)	305
D	Instructions: List each separate community served by the cable system. A "communi "a separate and distinct community or municipal entity (including unincorporated co discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list the unincorporate is a second areas.	mmunities within unincorporated areas and including single
	as the "first community." Please use it as the first community on all future filings.	
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile h identified city.	nome parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	BURLINGTON	KS
First		
Community	BALDWIN CITY	KS
	BURLINGAME	KS
d Rows as Necessary	CARBONDALE	KS
	EDGERTON	KS
	GRIDLEY	KS
	LEBO	KS
	LEROY	KS
	LYNDON	KS
	NEW STRAWN	KS
	OSAGE CITY	KS
	SCRANTON	KS
	WELLSVILLE	KS

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:						FORM SA1	TEM ID
Name	MEDIACOM SOUTHEAS		RLING	TON, KS)					3053
					ATE0				
E	SECONDARY TRANSMISSION In General: The information in s					v transmission	service of	the cable	
_	system, that is, the retransmission			-		•			
Secondary	about other services (including p	oay cable) in sp	oace F,	not here. All th	e facts you	i state must be			
Transmission	last day of the accounting period								
Service: Sub- scribers and	Number of Subscribers: Both down by categories of secondar	•							
Rates	each category by counting the n								
	separately for the particular serv							5	
	Rate: Give the standard rate of								
	unit in which it is generally billed					rd rate variatior	is within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block					ondary transmis	ssion servi	ce that cable	
	systems most commonly provide			-					
	that applies to your system. Not								
	categories, that person or entity						•		
	subscriber who pays extra for ca first set" and would be counted o					d in the count ur	nder "Servi	ice to the	
	Block 2: If your cable system					service that are	e different f	from those	
	printed in block 1 (for example, t								
	with the number of subscribers a	and rates, in th	e right-l	hand block. A t	wo- or thre	e-word descript	ion of the	service is	
	sufficient.				1		D I 0.01	<u> </u>	
	BLC	DCK 1 NO. OF					BLOCK	NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SE	RVICE	SUBSCRIBERS	RATE
	Residential:								
	 Service to first set 		1,248	29.95-56.49					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		1	29.95-56.49					
	Converter								
	• Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SSIONS: RATE	S				
-	In General: Space F calls for ra					Il your cable sys	stem's serv	vices that were	
F	not covered in space E, that is, t					,	,		
Services	service for a single fee. There an furnished at cost or (2) services	•			•		• •	,	
Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		,	,,,,,,				- 3	
Fransmissions:	Block 1: Give the standard rat			•		• •			
Rates	Block 2: List any services that	• •			-	-	-		
	listed in block 1 and for which a brief (two- or three-word) descrip				isned. List	these other ser	vices in the	e form of a	
								DI OOK A	
	CATEGORY OF SERVICE	BLO RATE		GORY OF SER	VICE	RATE	CATEGO	BLOCK 2 DRY OF SERVICE	RATE
	Continuing Services:			ation: Non-res			0.1120		
	• Pay cable	PP	• Mo	otel, hotel			Family	Cable	83.9
	• Pay cable—add'l channel	PP		mmercial					
	Fire protection			y cable					
	•Burglar protection			y cable-add'l cł	nannel				
	Installation: Residential			e protection					
	First set	99.99		rglar protection					
	Additional set(s)	15.00-49.00		services:					
	• FM radio (if separate rate)			connect		49.00			
	• Converter	10.50		sconnect					
				itlet relocation		15.00-49.00			
	1						h		
			• Mo	ove to new addr	ess				

Nama	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name	MEDIACOM SOUTHEA	ST LLC (BURLINGTON, KS)		305
	PRIMARY TRANSMITTERS:	TELEVISION		
G		tify every television station (including		
9		during the accounting period, except effect on June 24, 1981, permitting th		
Primary	76.59(d)(2) and (4), 76.61(e)	(2) and (4), or 76.63 (referring to 76.6		
Transmitters: Television		explained in the next paragraph With respect to any distant stations ca	arried by your cable system on a subs	stitute program
		es, regulations, or authorizations: in space G—but do list it in space I (th	e Special Statement and Program L	ng\if the
	station was carried only on a	a substitute basis.		-
		so in space I, if the station was carried concerning substitute basis stations,		
	Column 1: List each station	s call sign. Do not report origination pr	rogram services such as HBO, ESPN	, etc. Identify each
	"WETA-2" as the same on the	with a station according to its over-the ie form.	-air designation. For example, report	t multistream
		number the FCC assigned to the televal is channel 4 in Washington, D.C.	vision station for broadcasting over th	ne air in its community
		case whether the station is a network	station, an independent station, or a r	noncommercia
		ing the letter "N" (for network), "N-M" ('E" (for noncommercial educational), o		
	For the meaning of these ter	ms, see page (iv) of the general instru	ctions in the paper SA1-2 form.	
		of each station. For U.S. stations, list ian stations, if any, give the name of the		
	1 00.1 of Mickidan of Oanad	an stations, if any, give the name of the	ie community with which the station is	s adminer
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KCPT/KCPT (HD) PBS	18	E	KANSAS CITY, MO
	KCPT-DT2 PBS Encore	18.2	E-M	KANSAS CITY, MO
	KCPT-DT3 Create	18.3	E-M	KANSAS CITY, MO
	KCPT-DT4 PBS Kids	18.4	E-M	KANSAS CITY, MO
	KCTV/KCTV (HD) CBS	24	N	KANSAS CITY, MO
	KCTV-DT2 COMET	24.2	I-M	KANSAS CITY, MO
	KCTV-DT3 This TV	24.3	I-M	KANSAS CITY, MO
	KCTV-DT4 Quest	24.4	I-M	KANSAS CITY, MO
d Rows as Necessary	KCWE (CW)/ KCWE HD	31		KANSAS CITY, MO
a now as necessary	KCWE-DT2 Justice Network	31.2	: I-M	KANSAS CITY, MO
	KMBC/KMBC (HD) ABC	29	N	KANSAS CITY, MO
	KMBC-DT2 MeTV	29.2	I-M	KANSAS CITY, MO
	KMCI/ KMCI HD (IND)	41	1	LAWRENCE, KS
	KMCI/ KMCI HD (IND) KMCI-DT2 Bounce TV	41 41.2	I I-M	LAWRENCE, KS
			I IM	
	KMCI-DT2 Bounce TV	41.2		LAWRENCE, KS
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery	41.2 41.3	I-M	LAWRENCE, KS LAWRENCE, KS
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery KMCI-DT4 Court TV	41.2 41.3 41.4	I-M	LAWRENCE, KS LAWRENCE, KS LAWRENCE, KS
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery KMCI-DT4 Court TV KPXE (ION)/ KPXE ION HD	41.2 41.3 41.4 51	i-M i-M	LAWRENCE, KS LAWRENCE, KS LAWRENCE, KS KANSAS CITY, MO
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery KMCI-DT4 Court TV KPXE (ION) KPXE ION HD KPXE-DT2 qubo	41.2 41.3 41.4 51 51.2	I-M I-M	LAWRENCE, KS LAWRENCE, KS LAWRENCE, KS KANSAS CITY, MO KANSAS CITY, MO
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery KMCI-DT4 Court TV KPXE (ION)/ KPXE ION HD KPXE-DT2 qubo KPWE-DT3 ION Life	41.2 41.3 41.4 51 51.2 51.3	I-M I-M I-M I-M	LAWRENCE, KS LAWRENCE, KS LAWRENCE, KS KANSAS CITY, MO KANSAS CITY, MO
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery KMCI-DT4 Court TV KPXE (ION) KPXE ION HD KPXE-DT2 qubo KPWE-DT3 ION Life KSHB/KSHB (HD) NBC KSHB-DT2 Grit	41.2 41.3 41.4 51 51.2 51.3 42	I I I I I I I I I I I I I I I I I I I	LAWRENCE, KS LAWRENCE, KS LAWRENCE, KS KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery KMCI-DT4 Court TV KPXE (ION)/ KPXE ION HD KPXE-DT2 qubo KPWE-DT3 ION Life KSHB/KSHB (HD) NBC	41.2 41.3 41.4 51 51.2 51.3 42 42.2 47	I-M I-M I-M I-M I-M I-M	LAWRENCE, KS LAWRENCE, KS LAWRENCE, KS KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery KMCI-DT4 Court TV KPXE (ION) KPXE ION HD KPXE-DT2 qubo KPWE-DT3 ION Life KSHB/KSHB (HD) NBC KSHB-DT2 Grit KSMO/KSMO (MyNET) (HD) KSMO-DT2 Light TV	41.2 41.3 41.4 51 51.2 51.3 42 42.2 47 47.2	I I I I I I I I I I I I I I I I I I I	LAWRENCE, KS LAWRENCE, KS LAWRENCE, KS KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery KMCI-DT4 Court TV KPXE (ION) KPXE ION HD KPXE-DT2 gubo KPWE-DT3 ION Life KSHB/KSHB (HD) NBC KSHB-DT2 Grit KSMO/KSMO (MyNET) (HD) KSMO-DT2 Light TV KSMO-DT3 DABL	41.2 41.3 41.4 51 51.2 51.3 42 42.2 47 47.2 47.3	IM IM IM IM IM IM IM	LAWRENCE, KS LAWRENCE, KS LAWRENCE, KS KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO KANSAS CITY, MO
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery KMCI-DT4 Court TV KPXE (ION)/ KPXE ION HD KPXE-DT2 qubo KPWE-DT3 ION Life KSHB/KSHB (HD) NBC KSHB-DT2 Grit KSMO-KSMO (MyNET) (HD) KSMO-DT2 Light TV KSMO-DT3 DABL KSMO-DT4 Cozi TV	41.2 41.3 41.4 51 51.2 51.3 42 42.2 47 47.2 47.3 47.4	IM IM IM IM IM I IM IM IM	LAWRENCE, KS LAWRENCE, KS LAWRENCE, KS KANSAS CITY, MO KANSAS CITY, MO
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery KMCI-DT4 Court TV KPXE (ION) KPXE ION HD KPXE-DT2 qubo KPWE-DT3 ION Life KSHB/KSHB (HD) NBC KSHB-DT2 Grit KSMO/KSMO (MyNET) (HD) KSMO-DT2 Light TV KSMO-DT3 DABL KSMO-DT4 Cozi TV KSMO-DT5 Circle	41.2 41.3 41.4 51 51.2 51.3 42 42.2 47 47.2 47.3 47.4 47.5	I-M I-M I-M I-M I-M I-M I-M I-M I-M I-M	LAWRENCE, KS LAWRENCE, KS LAWRENCE, KS KANSAS CITY, MO KANSAS CITY, MO
	KMCI-DT2 Bounce TV KMCI-DT3 Court TV Mystery KMCI-DT4 Court TV KPXE (ION)/ KPXE ION HD KPXE-DT2 qubo KPWE-DT3 ION Life KSHB/KSHB (HD) NBC KSHB-DT2 Grit KSMO-KSMO (MyNET) (HD) KSMO-DT2 Light TV KSMO-DT3 DABL KSMO-DT4 Cozi TV	41.2 41.3 41.4 51 51.2 51.3 42 42.2 47 47.2 47.3 47.4	IM IM IM IM IM I IM IM IM	LAWRENCE, KS LAWRENCE, KS LAWRENCE, KS KANSAS CITY, MO KANSAS CITY, MO

	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM II				
Name		ST LLC (BURLINGTON, KS)		3053				
	PRIMARY TRANSMITTERS:							
~	In General: In space G, iden	tify every television station (including	translator stations and low power tele	evision stations)				
G			(1) stations carried only on a part-tim					
Primary			he carriage of certain network progran \$1(e)(2) and (4))]; and (2) certain static					
nsmitters: elevision	substitute program basis, as	explained in the next paragraph	arried by your cable system on a subs					
elevision	basis under specific FCC rule	es, regulations, or authorizations:						
	 Do not list the station here station was carried only on a 		he Special Statement and Program Lo	og)—if the				
	 List the station here, and al 	so in space I, if the station was carrie	d both on a substitute basis and also					
			see page (v) of the general instruction program services such as HBO, ESPN					
	multicast stream associated	with a station according to its over-the	e-air designation. For example, report					
	"WETA-2" as the same on th Column 2: Give the channel		evision station for broadcasting over th	ne air in its community				
	of license. For example, WR	C is channel 4 in Washington, D.C.	station, an independent station, or a r					
			(for network multicast), "I" (for indepen					
		E" (for noncommercial educational), on mercial educational), on ms, see page (iv) of the general instru-	or "E-M" (for noncommercial education	nal multicast).				
				licensed by the				
	Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified							
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN KTKA-DT2 getTV	2. B'CAST CHANNEL NUMBER 49.2	3. TYPE OF STATION	4. LOCATION OF STATION				
	KTKA-DT2 getTV	49.2	I-M	TOPEKA, KS				
	KTKA-DT2 getTV KTKA-DT3 CW	49.2 49.3	I-M I-M	TOPEKA, KS TOPEKA, KS				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network	49.2 49.3 49.4	I-M I-M	TOPEKA, KS TOPEKA, KS TOPEKA, KS				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network KTMJ:KTMJ (HD) FOX KTMJ-DT2 Escape	49.2 49.3 49.4 49.4 43 43 43	LM LM LM L L L L L L	TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network KTMJ-KTMJ (HD) FOX KTMJ-DT2 Escape KTMJ-DT3 Grit	49.2 49.3 49.4 43.4 43 43 43 43.2 43.3	LM LM LM L L L L L L L L L L	ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network KTMJ-DT2 Escape KTMJ-DT3 Grit KTMJ-DT3 Grit	49.2 49.3 49.4 43.4 43 43 43 43.2 43.3 43.4 43.4	LM LM LM L LM LM	ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network KTMJ-DT2 Escape KTMJ-DT3 Grit KTMJ-DT4 Laff KTMJ-DT4 Laff	49.2 49.3 49.4 43.4 43 43 43 43.2 43.3 43.4 43.4 11	LM LM I I LM LM E	ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network KTMJ-DT4 Justice Network KTMJ-DT2 Escape KTMJ-DT3 Grit KTMJ-DT4 Laff KTMJ-DT4 Laff KTWU/KTWU (HD) PBS KTWU-DT2 PBS KID5/MHz W	49.2 49.3 49.4 43.4 43 43.2 43.2 43.3 43.4 43.4 11 11.2		ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network KTMJ-DT4 Justice Network KTMJ-DT2 Escape KTMJ-DT3 Grit KTMJ-DT3 Grit KTMJ-DT4 Laff KTWU/KTWU (HD) PBS KTWU-DT2 PBS KID5/MHz W KTWU-DT3 Create/PBS Enco	49.2 49.3 49.4 43 43 43 43 43 43 43.2 43.3 43.4 11 11.2 11.3	LM LM I I LM LM E	ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network KTMJ-DT4 Justice Network KTMJ-DT2 Escape KTMJ-DT3 Grit KTMJ-DT4 Laff KTMJ-DT4 Laff KTWU/KTWU (HD) PBS KTWU-DT2 PBS KID5/MHz W	49.2 49.3 49.4 43.4 43 43.2 43.2 43.3 43.4 43.4 11 11.2		ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network KTMJ-DT4 Justice Network KTMJ-DT2 Escape KTMJ-DT3 Grit KTMJ-DT3 Grit KTMJ-DT4 Laff KTWU/KTWU (HD) PBS KTWU-DT2 PBS KID5/MHz W KTWU-DT3 Create/PBS Enco	49.2 49.3 49.4 43 43 43 43 43 43 43.2 43.3 43.4 11 11.2 11.3		ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network KTMJ-KTMJ (HD) FOX KTMJ-DT2 Escape KTMJ-DT3 Grit KTMJ-DT4 Laff KTMU-DT3 Grit KTWU-DT2 PBS KIDS/MHz W KTWU-DT3 Create/PBS Enco WDAF/WDAF (HD) FOX	49.2 49.3 49.4 43 43.4 43 43.2 43.3 43.4 11 11.2 11.3 32	I-M I-M I I I-M I-M E E E-M E-M I I	ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS ТОРЕКА, KS				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network KTMJ-KTMJ (HD) FOX KTMJ-DT2 Escape KTMJ-DT3 Grit KTMJ-DT4 Laff KTMJ-DT4 Laff KTWU/KTWU (HD) PBS KTWU-DT2 PBS KIDS/MHz W KTWU-DT3 Create/PBS Enco WDAF/WDAF (HD) FOX WDAF-DT2 Antenna	49.2 49.3 49.4 43 43.4 43 43.2 43.3 43.4 11 11.2 11.3 32 32.2	I-M I-M I-M I-M I-M E E-M E-M I I I I I I I I I I I I	TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS KANSAS CITY, MO				
	KTKA-DT2 getTV KTKA-DT3 CW KTKA-DT4 Justice Network KTMJ-KTMJ (HD) FOX KTMJ-DT2 Escape KTMJ-DT3 Grit KTMJ-DT4 Laff KTWU/KTWU (HD) PBS KTWU-DT3 Create/PBS Enco WDAF-WDAF (HD) FOX WDAF-DT2 Antenna WDAF-DT3 Court TV	49.2 49.3 49.4 43 43 43.2 43.3 43.4 11 11 11.2 11.3 32 32.2 32.2 32.3	I-M I-M I-M I-M I-M E E-M E-M I I I I I I I I I I I I I	TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS TOPEKA, KS KANSAS CITY, MO KANSAS CITY, MO				
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EGAL NAME OF			C (BURLINGTON, KS)					SYSTEM I 305
	every radio s	tation ca	rried on a separate and discre nerally receivable by your cabl					н
eceivable if (1) n the basis of r or detailed info aper SA1-2 for Column 1: Id Column 2: S Column 3: If ignal, indicate t Column 4: G	it is carried by monitoring, to rmation abou m. entify the call tate whether t the radio stat this by placing ive the statior	y the sys be receivent t the Co sign of e he station ion's sign g a check n's location	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. n is AM or FM. hal was electronically processes (mark in the "S/D" column. on (the community to which the the community with which the	the system's he ystem's FM ante his point, see page ed by the cable s e station is licens	adend, and (2 nna, during ce ge (v) of the ge ystem as a se red by the FCC) it can l ertain st eneral ir parate a	be expected, ated intervals. Instructions in the.	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		3/D	LOCATION OF STATION	CALL SIGN		5/D	LOCATION OF STATION	

Accounting Perio	od: 2020/2						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	MEDIACOM SOUTHE	AST LLC ((BURLINGT	ON, KS)				30530
	SUBSTITUTE CARRIAG)G			
1								
•	In General: In space I, iden							
Substitute	substitute basis during the a explanation of the programmed by the							
Carriage:					ine general in			
Special	1. SPECIAL STATEMEN	-						
Statement and	 During the accounting per 	riod, did yo	ur cable syste	m carry, on a substitute ba	asis, any noni	network te	levision prog	Iram
Program Log	broadcast by a distant sta	ation?					YES	× NO
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you i	nust com	plete the prog	gram
	log in block 2.		·	• · ·				-
	2. LOG OF SUBSTITUT	E PROGR	AMS					
	In General: List each subs				s wherever p	ossible, if	their meanin	g is
	clear. If you need more spa							
				vision program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re Do not use general catego							
	"NBA Basketball: 76ers vs			Condin. List specific progra		zampic,	I LOVE LUCY	01
			dcast live, ent	er "Yes." Otherwise enter	"No."			
				casting the substitute prog				
				the community to which th			the FCC or,	in
	the case of Mexican or Ca						la with the r	month
	first. Example: for May 7 g		/ when your sy	stem carried the substitute	e program. U	se numera	ais, with the r	nonun
			e substitute pr	ogram was carried by you	ır cable svste	m. List the	times accur	atelv
	to the nearest five minutes							
	stated as "6:00–6:30 p.m."							
	Column 7: Entor the let	ter "R" if the	e listed prograi	n was substituted for prog				
							the listed nr	
	to delete under FCC rules	and regulat	ions in effect o	during the accounting perio	dar ECC rular		lations in	ograffi
	to delete under FCC rules was substituted for program	mming that	ions in effect o your system w	during the accounting perio as permitted to delete und	der FCC rules	and regu	lations in	ogram
	to delete under FCC rules	mming that	ions in effect o your system w	luring the accounting perion as permitted to delete und	der FCC rules	and regu	lations in	ogram
	to delete under FCC rules was substituted for program	mming that	ions in effect o your system w	luring the accounting perion as permitted to delete und	der FCC rules	N SUBST	lations in	
	to delete under FCC rules was substituted for program effect on October 19, 1976	mming that	your system w	as permitted to delete und	der FCC rules	and regu	Iations in TTUTE CURRED	7. REASON FOR
	to delete under FCC rules was substituted for program effect on October 19, 1976	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	Iations in TITUTE CURRED TIMES	
	to delete under FCC rules was substituted for program effect on October 19, 1976	UBSTITUT	your system w	as permitted to delete und	der FCC rules WHE CARRI	and regu	Iations in TTUTE CURRED	7. REASON FOR
	to delete under FCC rules was substituted for program effect on October 19, 1976	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	Iations in TITUTE CURRED TIMES	7. REASON FOR
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	to delete under FCC rules was substituted for program effect on October 19, 1976	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	Iations in TITUTE CURRED TIMES	7. REASON FOR
	to delete under FCC rules was substituted for program effect on October 19, 1976	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	Iations in TITUTE CURRED TIMES	7. REASON FOR
	to delete under FCC rules was substituted for program effect on October 19, 1976	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	Iations in TITUTE CURRED TIMES	7. REASON FOR
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	to delete under FCC rules was substituted for program effect on October 19, 1976	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	Iations in TITUTE CURRED TIMES	7. REASON FOR
	to delete under FCC rules was substituted for program effect on October 19, 1976	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	Iations in TITUTE CURRED TIMES	7. REASON FOR
	to delete under FCC rules was substituted for program effect on October 19, 1976	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	Iations in TITUTE CURRED TIMES	7. REASON FOR
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	to delete under FCC rules was substituted for program effect on October 19, 1976	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	Iations in TITUTE CURRED TIMES	7. REASON FOR
	to delete under FCC rules was substituted for program effect on October 19, 1976	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	Iations in TITUTE CURRED TIMES	7. REASON FOR

Accounting Period:	2020/2			FORM	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM SOUTHEAST LLC (BURLINGTON, KS)				8YSTEM ID# 30530
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file an all amounts (gross receipts) paid to your cable system by subscribers for the s (as identified in space E) during the accounting period. For a further explanatic 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 receipting the second service of the second service of the service of the second second service of the second second service of the second s	ystem's see on of how to	condary transm compute this a	ission service amount, see \$ 34	
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 l • Use block 3 if the amount of gross receipts in space K is more than \$263,800 l See page (vi) of the general instructions located in the paper SA1-2 form for more in	out less tha nformation	in \$527,600	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137	,100 OR L	ESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalt accounting period is \$52.00	y fee that yo	ou must pay for	this six-mon	
	Line 1. Royalty fee for accounting period				
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lin	nes 1 and 2			
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES	SS (but mo	re 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 l	ess than \$527	,600)	
	1. Enter the amount of gross receipts from space K	\$	348,095.18		
	2. Base amount under statutory formula	\$	263,800.00		
	3. Subtract line 2 from line 1	\$	84,295.18		
	4. Multiply line 3 by .01		\$	842.95	
	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 .		\$	2,161.95
	FILING FEE AND TOTAL REMITTANCE DU	E			
Filing Fee and					
Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	2,161.95	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations) .		\$	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	2,181.95
	Important: Your remittance must be in the form of an electronic payr See page i of the general instructions in the paper SA1				ghts!

Accounting Period:	2020/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM SOUTHEAST LLC (BURLINGTON, KS)	SYSTEM ID# 30530
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 and nonbroadcast services	62 68
N Individual to Be Contacted for Further	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.) Name Kenneth J. Kohrs	845-443-2762
Information	Address One Mediacom Way (Number, street, rural route, apartment, or suite number) Mediacom Park, NY 10918 (City, town, state, zip) Email Copyrights@mediacomcc.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 owner of the cable system as identified in line 1 of space B 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 hereiare 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)] (I su S.C., Section 1001(1986)] 	system as identified /ner of the cable system
	(Title of official position held in corporation or partnership) Date: 2/15/2021	

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 fing, a determination that would be made by a court of law.

	/2				FORM SA1-2E. PAGE
AL NAME OF OWNER	OF CABLE SYSTEM:				SYSTEM I
DIACOM SOUTH	EAST LLC (BURLINGTON, KS)				3053
The Satellite Home lowing sentence: "In determinin service of pro- scribers and For more informatio located in the paper During the accounting	EMENT CONCERNING GROSS RE Viewer Act of 1988 amended Title 17, section ing the total number of subscribers and the g poviding secondary transmissions of primary b amounts collected from subscribers receivin in on when to exclude these amounts, see the SA1-2 form. Ing period, did the cable system exclude any irriers to satellite dish owners?	on 111(d)(1)(A), of the ross amounts paid to proadcast transmitter g secondary transmis e note on page (vii) o	e Copyright Act by adding the cable system for the s, the system shall not in ssions pursuant to section of the general instructions	basic clude sub- n 119." s	P Special Statement Concerning Gross Receipts Exclusior
YES. Enter the	total here and list the satellite carrier(s) below	w	\$		
Name Mailing Address		Name Mailing Address			1
INTEREST ASS	EROMENT				
	this worksheet for those royalty payments su of interest assessment, see page (viii) of the				Q
For an explanation of		general instructions	located in the paper SA1		Q Interest Assessmer
For an explanation of Line 1 Enter the ar	of interest assessment, see page (viii) of the nount of late payment or underpayment	general instructions	ocated in the paper SA1		Q Interest Assessmer
For an explanation of Line 1 Enter the ar	of interest assessment, see page (viii) of the	general instructions	ocated in the paper SA1		Q Interest Assessmer
For an explanation of Line 1 Enter the ar	of interest assessment, see page (viii) of the nount of late payment or underpayment	general instructions	ocated in the paper SA1		Q Interest Assessmer
For an explanation of Line 1 Enter the ar Line 2 Multiply line	of interest assessment, see page (viii) of the nount of late payment or underpayment	general instructions	x	-2 form. 	Q Interest Assessmer
For an explanation of Line 1 Enter the ar Line 2 Multiply line Line 3 Multiply line	of interest assessment, see page (viii) of the mount of late payment or underpayment 1 by the interest rate* and enter the sum he 2 by the number of days late and enter the s	general instructions	xx	-2 form. 	Q Interest Assessmer
For an explanation of Line 1 Enter the ar Line 2 Multiply line Line 3 Multiply line	of interest assessment, see page (viii) of the mount of late payment or underpayment 1 by the interest rate* and enter the sum he 2 by the number of days late and enter the s 3 by 0.00274** and enter here	general instructions	x	-2 form. 	Q Interest Assessmen
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