This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1)

If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED	AMOUNT						
08/23/21	\$ ALLOCATION NUMBER						

Return completed workbook by email to:

coplicsoa@copyright.gov

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

Α	ACCOUNTING 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.	81							
		LECAL NAME OF OWNED/MAILING ADDRESS OF CARLE SYSTEM								
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	General Communication Inc. BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)									
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM								
		2550 Denali Street, Ste. 1000								
		(Number, street, rural route, apartment, or suite number) Anchorage, AK 99503-2751								
		(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 as already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space								
System	1	IDENTIFICATION OF CABLE SYSTEM:								
		GCI Cable, Inc Cordova								
		MAILING ADDRESS OF CABLE SYSTEM:								
	2	P.O. Box 828 (Number, street, rural route, apartment, or suite number)								
		Cordova, AK 99574 (City, town, state, zip code)								

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

Accounting Period:	2021/1							
	THE OF OUR DE CARLE OF CARLE OVOTEN.	FORM SA1-2E. PAGE 1b. SYSTEM ID#						
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:							
	General Communication Inc. Instructions: List each separate community served by the cable system. A "community	3181						
D	separate and distinct community or municipal entity (including unincorporated community unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serv community." Please use it as the first community on all future filings.	unities within unincorporated areas and including single, discrete e as a form of system identification hereafter known as the "first						
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho	me parks should be reported in parentheses below the identified						
Served	city.							
	CITY OR TOWN	STATE						
First Community	Cordova	AK						
Add Rows as Necessary								

Accounting Period: 2021/1

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

General Communication Inc.

FORM SA1-2E. PAGE 2.

SYSTEM ID#

3181

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOCH	< 2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
Service to first set	215	\$14.99			
Service to additional set(s)					
• FM radio (if separate rate)					
Motel, hotel	4	170.23			
Commercial	13	\$14.99			
Converter					
Residential					
Non-residential					
1				1	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable	20.11	Motel, hotel		Digital Converter	5.99
Pay cable—add'l channel		Commercial		Tier 2	\$61.22
Fire protection		• Pay cable		Digital Tiers	14.25
Burglar protection		Pay cable-add'l channel	Pay cable-add'l channel		
Installation: Residential	tallation: Residential • Fire protection			DVR Tuner	14.99
• First set	25.50	Burglar protection			
Additional set(s)	15.00	Other services:			
• FM radio (if separate rate)		Reconnect	20.00		
Converter					
		Outlet relocation	20.00		
		Move to new address			

Accounting Period: 2021/1 FORM SA1-2E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Name
SYSTEM ID#

3181

General Communication Inc.

PRIMARY TRANSMITTERS: TELEVISION

G

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

• Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.

• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

Column 1: List each station's call sign. *Do not* report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community of license. For example, WRC is channel 4 in Washington, D.C.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form.

Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Add Rows as Necessary

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
KTBY	4.1	l	Anchorage, AK
KYES	5.1	l	Anchorage, AK
KTUU	2.1	N	Anchorage, AK
KYUR	13.1	N	Anchorage, AK
KYUR-2	13.2	I-M	Anchorage, AK
KYES-4	5.4	I-M	Anchorage, AK
ктоо	3.1	E	Juneau, AK
KT00-2	3.2	E-M	Juneau, AK

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

General Communication Inc.

3181

PRIMARY TRANSMITTERS: RADIO

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

Н

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

Primary Transmitters: Radio

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

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

CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
KLAM	FM		Cordova, AK				
			,				
						ļ	
		ļ					
		ļ					

Accounting Perior	d: 2021/1 LEGAL NAME OF OWNER OF O	ARI E SVST	EM:					FOI	SYSTEM ID#
Name	General Communication		LIVI.						3181
	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOC	;				
Substitute	n General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.								
Carriage:	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE								
Special	During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program								
Program Log	ment and								X NO
	Note: If your answer is "No"	, leave the	rest of this pag	e blank. If your answer is	"Yes," yo	ou mi	ust complet		
	log in block 2.								
	2. LOG OF SUBSTITUTE								
	In General: List each substi				whereve	r pos	ssible, if the	ir meaning i	s
	clear. If you need more space Column 1: Give the title of				program	") tha	at during th	e accountin	a
	period, was broadcast by a								
	under certain FCC rules, reç	,							
	Do not use general categori		vies" or "baske	tball." List specific progra	m titles, f	or ex	ample, "I L	ove Lucy" o	r
	"NBA Basketball: 76ers vs. I Column 2: If the program		lcast live, ente	"Yes." Otherwise enter "	No."				
	Column 3: Give the call s		,						
	Column 4: Give the broa							e FCC or, in	
	the case of Mexican or Cana Column 5: Give the mon							with the mo	onth
	first. Example: for May 7 giv	,	wileli your sysi	em camed the substitute	program	. 030	riumerais,	with the file	niui –
	Column 6: State the time	s when the			•				ely
	to the nearest five minutes.	Example: a	program carrie	ed by a system from 6:01	:15 p.m. 1	0 6:2	28:30 p.m. s	should be	
	stated as "6:00–6:30 p.m." Column 7: Enter the letter	r "R" if the	listed program	was substituted for progr	amming t	hat v	our system	was requir	ed
	to delete under FCC rules a				-		•	•	
	was substituted for program	ming that y	our system wa	s permitted to delete und	er FCC ru	ıles a	and regulati	ons in	
	effect on October 19, 1976.								
						WHE	EN SUBST	ITUTE	
	S	JBSTITUT	E PROGRAM		11		IAGE OCC	_	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MC AND		6. FROM	TIMES — TO	DELETION
					_				
					-				
					-				
					_				
								_	
								_	
					-		 		
					-		 		
					-		 		
					_				
								_	
					-			_	
									
					_				
								_	
					-		 		
								_	

Accounting Period: 2	2021/1	FORM S	A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	YSTEM ID#
Name	General Communication Inc.		3181
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 transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	ission service mount, see	8,208.00
	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 \$200. Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600. See page (vi) of the general instructions located in the paper SA1-2 form for more information.	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for the accounting period is \$52.00	nis six-month	
	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		
	1. Base amount under statutory formula		
	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)	
	BEOOK 3. GROOS RECEIL TO ST WORL THAN \$200,000 (but less than \$321)	000)	
	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
	EFT Trace # or TRANSACTION ID #		
	<u>Important:</u> Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more		

Accounting Period: 2	2021/1					FORM SA1-2E. PAGE 7.		
Name	LEGAL NAME OF ON General Commu	WNER OF CABLE SYSTEM: unication Inc.				SYSTEM ID# 3181		
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							
		cast services				226		
N Individual to Be Contacted		BE CONTACTED IF FURTH		RMATION IS NEEDED (Identify an individual to	whom			
for Further Information	Name	Cindy Hall			Telephone	907-868-5615		
	Address	2550 Denali Street, S (Number, street, rural route, apartu	ment, or suit					
		Anchorage, AK 9950 (City, town, state, zip)			007.000			
	Email	chall2@gci.c	com	Fax (o _l	ptional 907-868-	9817		
0	CERTIFICATION (This statement of account mu	ust be cert	ified and signed in accordance with Copyright C	Office regulations)			
Certification	• I, the undersigned	d, hereby certify that (Check or	ne, <i>but onl</i>	v one, of the boxes.)				
	(Owner	other than corporation or p	partnership	b) I am the owner of the cable system as identified	I in line 1 of space B	; or		
				rtnership) I am the duly authorized agent of the o not a corporation or partnership; or	owner of the cable sy	/stem as identified		
		r or partner) I am an officer (in line 1 of space B.	(if a corpora	ation) or a partner (if a partnership) of the legal ent	tity identified as own	er of the cable system		
		e, and correct to the best of m		lare under penalty of law that all statements of fac ge, information, and belief, and are made in good f				
			X	/s/ Duncan Whitney				
				electronic signature on the line above to certify this s ature using an "/s/ signature" (e.g., /s/ John Smith)				
		Typed or printed	d name:	Duncan Whitney				
		Title:		Product Officer position held in corporation or partnership)				
		Date:		8/2	0/2021			

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

counting Period: 2021/1		FORM SA1-2E. PAGE 8.
GAL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#
neral Communication Inc.		3181
SPECIAL STATEMENT CONCERNING GROSS RECEI The Satellite Home Viewer Act of 1988 amended Title 17, section 11 lowing sentence: "In determining the total number of subscribers and the gross service of providing secondary transmissions of primary broat scribers and amounts collected from subscribers receiving secondary transmissions of primary broat scribers and amounts collected from subscribers receiving secondary transmissions of primary broat scribers and amounts collected from subscribers receiving secondary transmissions of primary broat scribers and amounts collected from subscribers receiving secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross service of providing secondary transmissions of primary broat scribers and the gross scribers a	and 11(d)(1)(A), of the Copyright Act by adding the fol- s amounts paid to the cable system for the basic adcast transmitters, the system shall not include sub- econdary transmissions pursuant to section 119." ote on page (vii) of the general instructions ounts of gross receipts for secondary transmissions	P Special Statement Concerning Gross Receipts Exclusion
	Name	
	Mailing Address	
INTEREST ASSESSMENT		
You must complete this worksheet for those royalty payments submi For an explanation of interest assessment, see page (viii) of the gen-		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here		
Line 2 Multiply line 1 by the line estrate and enter the sum here		
	xdays	
Line 3 Multiply line 2 by the number of days late and enter the sum	here	
Line 4 Multiply line 3 by 0.00274** and enter here	X 0.00274	
in space L, (page 6) block 1, line 2, or block 2 line 8, or block		
	(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licencontact the Licensing Division at (202) 707-8150 or licensing@		
** This is the decimal equivalent of 1/365, which is the interest as	ssessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of accoulist below the owner, address, first community served, ID number, and		
Ounor		
Owner Address		
ID number		
First community served		
Accounting period		

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.