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:

coplicsoa@loc.gov

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

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

 8-4-21
 \$

 ALLOCATION NUMBER

Α	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
Accounting		Barcode Data Filing Period (optional - see instructions)
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.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		MonCre Telephone Cooperative
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM 227 Main Street
		(Number, street, rural route, apartment, or suite number)
		Ramer, AL 36069 (City, town, state, zip)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
System	1	IDENTIFICATION OF CABLE SYSTEM:
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal 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#
	MonCre Telephone Cooperative	63814
D	Instructions: List each separate community served by the cable system. A "commun separate and distinct community or municipal entity (including unincorporated com unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will se community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile	munities within unincorporated areas and including single, discrete erve as a form of system identification hereafter known as the "first
Area Served	city.	
	CITY OR TOWN	STATE
First Community	Ramer	AL
Community	Grady Highland Home	AL AL
dd Rows as Necessary	Lapine	AL
,	Pine Level	AL

	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM						FORM SA1-	TEM ID
Name	MonCre Telephone Coo							010	6381
E	SECONDARY TRANSMISSION In General: The information in s					v transmission	service of t	he cable	
_	system, that is, the retransmission	•		-					
Secondary	about other services (including p	, , ,	,		,		those exist	ting on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						ble system	broken	
scribers and	down by categories of secondary	•							
Rates	each category by counting the n	•		•		•			
	separately for the particular serv							no and the	
	Rate: Give the standard rate c unit in which it is generally billed	-						-	
	category, but do not include disc								
	Block 1: In the left-hand block	•		•					
	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 of	0			()			Al	
	Block 2: If your cable system printed in block 1 (for example, t	Ũ							
	with the number of subscribers a								
	sufficient.		0						
	BLC	DCK 1 NO. OF					BLOCK	C2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIBE	รร	RATE	CATE	GORY OF SE	RVICE	SUBSCRIBERS	RAT
	Residential:								
	Service to first set		670	42.99	Preferre			245	60.0
	Service to additional set(s)				Premie			320	17.0
	• FM radio (if separate rate)				Pinnacl	eIV		57	42.0
	Motel, hotel								
	Commercial								
	Converter								
	Residential Non-residential								
	• Non-residential								
	SERVICES OTHER THAN SEC				-				
F	In General: Space F calls for rat		,		•				
•	not covered in space E, that is, t service for a single fee. There ar						-		
Services	furnished at cost or (2) services	•			U				
Other Than	amount of the charge and the ur		isually bill	ed. If any r	ates are ch	arged on a var	iable per-p	rogram basis,	
Secondary ransmissions:	enter only the letters "PP" in the Block 1: Give the standard rat		e cable si	istem for e	ach of the :	annlicable serv	ices listed		
Rates	Block 2: List any services that							were not	
	listed in block 1 and for which a	separate charge	was mad	le or establ	ished. List	these other ser	vices in the	e form of a	
	brief (two- or three-word) descrip	otion and include	the rate	for each.					
			К1					BLOCK 2	
		BLOC						2200.12	
	CATEGORY OF SERVICE	RATE C	CATEGOF	RY OF SER		RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services:	RATE C	CATEGOF	n: Non-res		RATE			
	Continuing Services: • Pay cable	RATE C	CATEGOF nstallatio • Motel,	n: Non-res hotel		RATE	НВО	DRY OF SERVICE	16.9
	Continuing Services: • Pay cable • Pay cable—add'l channel	RATE C	CATEGOF nstallatio • Motel, • Comm	n: Non-res hotel ercial		RATE	HBO Cinema	DRY OF SERVICE	RAT
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	RATE C	CATEGOF nstallatio • Motel, • Comm • Pay ca	n: Non-res hotel ercial ible	idential	RATE	HBO Cinema Starz &	DRY OF SERVICE	16.9 12.9 12.9
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	RATE C	CATEGOF nstallatio • Motel, • Comm • Pay ca • Pay ca	n: Non-res hotel ercial ıble ıble-add'l c	idential	RATE	HBO Cinema Starz & Showti	DRY OF SERVICE	16.9 12.9 12.9 15.9
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	RATE C	CATEGOF nstallatio • Motel, • Comm • Pay ca • Pay ca • Fire pr	n: Non-res hotel ercial ible ible-add'l cl otection	idential	RATE	HBO Cinema Starz & Showti Sportsj	DRY OF SERVICE ax Encore me/TMC plus	16.9 12.9 12.9 15.9 6.9
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set	RATE C	CATEGOF nstallatio • Motel, • Comm • Pay ca • Pay ca • Pay ca • Fire pr • Burgla	n: Non-res hotel ercial ble ble-add'l cl otection r protectior	idential	RATE	HBO Cinema Starz & Showti	DRY OF SERVICE ax Encore me/TMC plus	16.9 12.9 12.9 15.9 6.9
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	RATE C	CATEGOF nstallatio • Motel, • Comm • Pay ca • Pay ca • Pay ca • Fire pro- • Burgla Other server	n: Non-res hotel ercial ble ble-add'l cl otection r protectior vices:	i dential hannel	RATE	HBO Cinema Starz & Showti Sportsj	DRY OF SERVICE ax Encore me/TMC plus	16.9 12.9 12.9 15.9 6.9
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set	RATE C	CATEGOF nstallatio • Motel, • Comm • Pay ca • Pay ca • Pay ca • Fire pr • Burgla	n: Non-res hotel ercial ble ble-add'l cl otection r protectior vices: nect	i dential hannel	RATE	HBO Cinema Starz & Showti Sportsj	DRY OF SERVICE ax Encore me/TMC plus	16.9 12.9 12.9 15.9 6.9
	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 C	ATEGOF nstallatio • Motel, • Comm • Pay ca • Pay ca • Fire pr • Burgla Other serv • Recon • Discon	n: Non-res hotel ercial ble ble-add'l cl otection r protectior vices: nect	i dential hannel	RATE	HBO Cinema Starz & Showti Sportsj	DRY OF SERVICE ax Encore me/TMC plus	16.9 12.9 12.9 15.9

unting Period: 2	-			FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF			SYSTEM ID 6381
		•		0001
G Primary ransmitters: Television	In General: In space G, ide carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, as	ntify every television station (including n during the accounting period, <i>except</i> n effect on June 24, 1981, permitting th e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. : With respect to any distant stations ca	 (1) stations carried only on a part-time e carriage of certain network program 1(e)(2) and (4))]; and (2) certain station 	e basis under is [sections ins carried on a
Television	basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on	lles, regulations, or authorizations: e in space G—but do list it in space I (th a substitute basis.	e Special Statement and Program Lo	g)—if the
	basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t	also in space I, if the station was carried in concerning substitute basis stations, i's call sign. <i>Do not</i> report origination p I with a station according to its over-the he form. I number the FCC assigned to the tele	see page (v) of the general instructior rogram services such as HBO, ESPN -air designation. For example, report	ns. , etc. Identify each multistream
	Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these te Column 4: Give the location	RC is channel 4 in Washington, D.C. case whether the station is a network s ring the letter "N" (for network), "N-M" ("E" (for noncommercial educational), c rms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	for network multicast), "I" (for indepen r "E-M" (for noncommercial educatior ctions in the paper SA1-2 form. the community to which the station is	dent), "I-M" aal multicast). licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WAIQ PBS	27	E	Montgomery, AL
	WAIQ PBS HD	27.1	E	Montgomery, AL
Rows as Necessary	WAIQ CREATE	27.2	E	Montgomery, AL
	WAIQ WORLD	27.3	E	Montgomery, AL
	WAKA CBS	25	Ν	Selma, AL
	WAKA CBS HD	25.1	Ν	Selma, AL
	WAKA ME TV	25.2	Ν	Selma, AL
	WBMM CW	18	I	Tuskegee, AL
	WBMM CW HD	18.1	Ι	Tuskegee, AL
	WCOV FOX	22	Ι	Montgomery, AL
	WCOV-FOX HD	22.1	I	Montgomery, AL
	WCOV ANTENNA TV	22.2	I	Montgomery, AL
	WCOV THIS TV	22.3	I	Montgomery, AL
	WMCF JUICE TV	28	Ι	Montgomery, AL
	WMCF TBN	28.1	I	Montgomery, AL
	WMCF OTHER	28.2	Ι	Montgomery, AL
	WMCF CHURCH	28.3	Ι	Montgomery, AL
	WNCF ABC	31	Ν	Montgomery, AL
		31.1	Ν	Montgomery, AL
	WNCF ABC HD	51.1		
	WNCF ABC HD WSFA NBC	8	N	Montgomery, AL
	WSFA NBC	8	Ν	Montgomery, AL

ephone Coo	operati	ve					638
		rried on a separate and discre	ete basis and list	those FM stati	ions car	ried on an	н
it is carried by monitoring, to prmation abou m.	y the sys be recei t the Co	tem whenever it is received at ved at the headend, with the s pyright Office regulations on t	t the system's he system's FM ante	adend, and (2) nna, during ce) it can b ertain sta	be expected, ated intervals.	Primary Transmitters Radio
tate whether t	he statio	n is AM or FM.					
			ed by the cable s	ystem as a se	parate a	ind discrete	
ive the station	n's locati	on (the community to which the			C or, in t	he case of	
AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
	NSMITTERS: every radio s vhose signals ations Concer it is carried by monitoring, to prmation about m. lentify the call tate whether t the radio stat this by placing ive the stations	NSMITTERS: RADIO every radio station ca whose signals were generations Concerning All it is carried by the system contoring, to be recein formation about the Co m. lentify the call sign of ef- tate whether the station the radio station's sign this by placing a check ive the station's location adian stations, if any,	NSMITTERS: RADIO every radio station carried on a separate and discre- whose signals were generally receivable by your cab etions Concerning All-Band FM Carriage: Under C it is carried by the system whenever it is received at monitoring, to be received at the headend, with the s formation about the Copyright Office regulations on t m. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically process this by placing a check mark in the "S/D" column. ive the station's location (the community to which the adian stations, if any, the community with which the	NSMITTERS: RADIO every radio station carried on a separate and discrete basis and list whose signals were generally receivable by your cable system during ations Concerning All-Band FM Carriage: Under Copyright Office re- it is carried by the system whenever it is received at the system's her monitoring, to be received at the headend, with the system's FM ante- promation about the Copyright Office regulations on this point, see pag- m. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable si- this by placing a check mark in the "S/D" column. ive the station's location (the community to which the station is licens adian stations, if any, the community with which the station is identified	NSMITTERS: RADIO every radio station carried on a separate and discrete basis and list those FM station signals were generally receivable by your cable system during the accounting tions Concerning All-Band FM Carriage: Under Copyright Office regulations, an it is carried by the system whenever it is received at the system's headend, and (2) monitoring, to be received at the headend, with the system's FM antenna, during co promation about the Copyright Office regulations on this point, see page (v) of the ge m. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable system as a se this by placing a check mark in the "S/D" column. ive the station's location (the community to which the station is licensed by the FCC adian stations, if any, the community with which the station is identified).	NSMITTERS: RADIO every radio station carried on a separate and discrete basis and list those FM stations car whose signals were generally receivable by your cable system during the accounting period etions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM sign it is carried by the system whenever it is received at the system's headend, and (2) it can be monitoring, to be received at the headend, with the system's FM antenna, during certain state promation about the Copyright Office regulations on this point, see page (v) of the general in m. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable system as a separate a this by placing a check mark in the "S/D" column. ive the station's location (the community to which the station is licensed by the FCC or, in t adian stations, if any, the community with which the station is identified).	NSMITTERS: RADIO every radio station carried on a separate and discrete basis and list those FM stations carried on an whose signals were generally receivable by your cable system during the accounting period. etions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. formation about the Copyright Office regulations on this point, see page (v) of the general instructions in the. m. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable system as a separate and discrete this by placing a check mark in the "S/D" column. ive the station's location (the community to which the station is licensed by the FCC or, in the case of adian stations, if any, the community with which the station is identified).

	d: 2021/1						FOF	RM SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYST	EM:					SYSTEM ID#
Name	MonCre Telephone Co	operative	1					63814
	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG				
I	In General: In space I, identi substitute basis during the a	ccounting pe	eriod, under spe	cific present and former FC	C rules, regula	ations, or au	uthorizations.	For a further
Substitute	explanation of the programm	ing that mus	t be included in	this log, see page (v) of the	general instru	uctions in th	e paper SA1-	-2 form.
Carriage:	1. SPECIAL STATEMENT		NING SUBST	ITUTE CARRIAGE				
Special Statement and	 During the accounting per 	iod, did you	r cable system	carry, on a substitute basi	s, any nonne	twork telev	ision program	n
Program Log	broadcast by a distant sta	tion?					YES	NO
	Note: If your answer is "No	", leave the	rest of this pag	je blank. If your answer is '	"Yes," you mu	ust complet	te the progra	ım
	log in block 2.							
	2. LOG OF SUBSTITUTE							
	In General: List each subst				wherever pos	sible, if the	eir meaning is	S
	clear. If you need more spa			ision program ("substitute j	orogram") the	at during th	ne accounting	n
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general categor							
		n was broad		r "Yes." Otherwise enter "N				
				sting the substitute progra			500	
	the case of Mexican or Can			e community to which the			e FCC or, in	
				tem carried the substitute			with the mo	nth
	first. Example: for May 7 giv		inion your eye					
			substitute pro	gram was carried by your o	cable system.	. List the tir	nes accurate	ely
	to the nearest five minutes.	Example: a	i program carri	ed by a system from 6:01:	15 p.m. to 6:2	8:30 p.m.	should be	
	stated as "6:00–6:30 p.m."	ar "D" if the	listed program	was substituted for progra	manaina that y	our oustom		a d
	to delete under FCC rules a			was substituted for progra				
	was substituted for program							Iaili
	effect on October 19, 1976.		,	- F				
					WHE	N SUBST		
	S	UBSTITUT	E PROGRAM					
		2. LIVE?				AGE OCC 6.	URRED	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			
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6.	TIMES	

LEGAL NAME OF OWNER OF CABLE SYSTEM:			S	YSTEM ID
MonCre Telephone Cooperative				6381
all amounts (gross receipts) paid to your cable system by subscribers for the sy (as identified in space E) during the accounting period. For a further explanation 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.	stem's seo	condary transmi compute this a	ssion service mount, see \$ 17	2,819.80
 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 b Use block 3 if the amount of gross receipts in space K is more than \$263,800 b 	ut less tha	n \$527,600	63,800	
BLOCK 1: GROSS RECEIPTS OF \$137	,100 OR L	LESS		
Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty accounting period is \$52.00	fee that you	u must pay for th	is six-month	
Line 1. Royalty fee for accounting period				
Line 2. Interest charge. Enter the amount from line 4. space Q. page 8				0.00
,, _,, _				
			00)	
· -	-		-	
			-	
-		·	172.819.80	
		· · · · · · · · · · · · · · · · · · ·	90,980.20	
			81,839.60	
			\$	409.20
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		\$	409.20
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263	800 (but l	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			0.00	
7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4,	5, and 6			
FILING FEE AND TOTAL REMITTANCE DUI	E			
1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		. \$	409.20	
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			\$	429.20
	MonCre Telephone Cooperative GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and all amounts (gross receipts from subscribers for secondary transmission service(s) during the accounting period. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ImpORTANT: You must complete a statement in space P concerning gross rec COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. Use block 3 if the amount of gross receipts in space K is more than \$137,100 or less. • Use block 3 if the amount of gross receipts in space K is more than \$263,000 bse page (vi) of the general instructions located in the paper \$A1-2 form for more in BLOCK 1: GROSS RECEIPTS OF \$137 Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty accounting period is \$52.00 Line 1. Royalty fee for accounting period Line 2. Interest charge. Enter the amount from line 4, space Q, page 8 1. Base amount under statutory formula 2. Enter amount of gross receipts from space K. 3. Subtract line 2 from line 1 4. Enter the amount of gross receipts from space K. 5. Enter the amount of gross receipts from space K. 6. Subtract line 6 from line 4 7. Mutiply line 6 by .005 (enter figure here) 8. Interest charge. Enter the amount from line 4, space Q, page 8	MonCre Telephone Cooperative GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount all amounts (gross receipts for secondary transmission service(s) during the accounting period. JMPORTANT: You must complete a statement in space P concerning gross receipts. COPYRICHT ROYALTY FEE Instructions: To compute the royally fee you owe: - Complete block 1, block 2, or block 3. Use block 1 we amount of gross receipts in space K is \$137,100 or less. Use block 1 we amount of gross receipts in space K is more than \$263,800 but less the sep age (v) of the general instructions located in the paper SA12 form for more information BLOCK 1: GROSS RECEIPTS OF \$137,100 or less. Use block 2 if the amount of gross receipts of \$137,100 or less, the royalty fee that you accounting period is \$20.00 Line 1. Royalty fee for accounting period . 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 BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more 1). In as a cable system with gross receipts form space K S. Subtract line 2 from line 4 . S Line 2. Interest charge. Enter the amount from line 4, space Q, page 8 . S 3. Subtract line 2 f	MonCre Telephone Cooperative GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. End all amounts (gross receipts form 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 (ii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	MonCre Telephone Cooperative GROSS RECEIPTS Instructions: The Signer 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 is identified in space [2] during the accounting period. Gra of there explanation of how to compute this amount, see page (vii) of the general instructions located in the page SA1-2 form. Gross receipts from subscribes for secondary transmission service() during the accounting period. § 177 OWNORT ROYLARY TEE Instructions: To compute the insurption period. Is \$137,100 or less. § 000000000000000000000000000000000000

Accounting Period:	2021/1	FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MonCre Telephone Cooperative	SYSTEM ID 6381
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried t to its subscribers, and (2) the cable system's total number of activated channels during the a 1. Enter the total number of channels on which the cable system carried television broadcast stations	accounting period.
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	353
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an in we can contact about this statement of account.)	ndividual to whom
for Further Information	Name Teresa Rich	Telephone 334-562-3473
	Address 227 MainStreet (Number, street, rural route, apartment, or suite number) Ramer, AL 36069 (City, town, state, zip)	
	Email teresa@mon-cre.net	Fax (optional
O Certification	CERTIFICATION (This statement of account must be certified and signed in accordance with C 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 a (Agent of owner other than corporation or partnership) I am the duly authorized age in line 1 of space B and that the owner is not a corporation or partnership; or X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statement are true, complete, and correct to the best of my knowledge, information, and belief, and are made [18 U.S.C., Section 1001(1986)] K /s/ Teresa Rich Enter an electronic signature on the line above to or Enter signature using an "/s/ signature" (e.g., /s/ J	as identified in line 1 of space B; or gent of the owner of the cable system as identified he legal entity identified as owner of the cable system ments of fact contained herein de in good faith.
	Typed or printed name: Teresa Rich Title: General Manager	
	(Title of official position held in corporation or partnership) Date:	7/26/2021

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.

unting Period: 2021/1	FORM SA1-2E. PAGE 8
IL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
Cre Telephone Cooperative	63814
 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 YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name	-
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
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	Q Interest Assessment
	Q Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Lander La
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
Line 1 Enter the amount of late payment or underpayment	L Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
Line 1 Enter the amount of late payment or underpayment	L Interest Assessment
Line 1 Enter the amount of late payment or underpayment	L Interest Assessment
Line 1 Enter the amount of late payment or underpayment	L Interest Assessment

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