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

STATEMI	FNT	OF ACCOUNT	FOR COPYRIG	Return completed workbook by email to:				
		ansmissions by	DATE RECEIVED	AMOUNT				
Cable Systems (Short Form) General instructions are located in the first tab of this workbook			2/24/22 \$ ALLOCATION NUM		<u>coplicsoa@loc.gov</u> For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150			
Α	ACC	OUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYYY/(Period))				
		2021/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31				
			Barcode Data Filing Period (optiona	I - see instructions)				
Accounting Period								
В		Instructions: Give the full legal name of the owner of t title of the subsidiary, not that of the par		sidiary of another corporation, give the full	corporate			
Owner		List any other name or names under which	ch the owner conducts the business of	iness of the cable system.				
		If there were different owners during the single statement of account and royalty f		n the last day of the accounting period shoul inting period.	d submit a			
		Check here if this is the system's first filin	g. If not, enter the system's ID numbe	er assigned by the Licensing Division.	63377			
		LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTE	И				
		Ronan Telephone Company						
		BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFEREN	T)				
		MAILING ADDRESS OF OWNER OF 312 Main St SW	CABLE SYSTEM					
	(Number, street, rural route, apartment, or suite number) Ronan, MT 59864							
	INIOTI	(City, town, state, zip)						
С				entify the business and operation of t he system, if different from the addre				
System	1	IDENTIFICATION OF CABLE SYSTEM:						
		Ronan MAILING ADDRESS OF CABLE SYSTEM	l:					
	(Number, street, rural route, apartment, or suite number)							

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.

City, town, state, zip code)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM				
Name	Ronan Telephone Company	63				
D	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter know as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the					
Served	identified city.					
	CITY OR TOWN	STATE				
First	Ronan	MT				
Community						
dd Dawr y Namer						
dd Rows as Necessary						

	FO LEGAL NAME OF OWNER OF CABLE SYSTEM:								
Name	Ronan Telephone Company								
	SECONDARY TRANSMISSION		IBSCR		TES				
Ε	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all categories of secondary transmission service of the cable							the cable	
	system, that is, the retransmission								
Secondary	about other services (including p						those exis	ting on the	
Fransmission	last day of the accounting period						hla avatan	a brakan	
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			0,0		•		0	
	Rate: Give the standard rate c	-	-					-	
	unit in which it is generally billed				ny standa	rd rate variatior	is within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block				ies of ser	ondary transmi	ssion serv	ice that cable	
	systems most commonly provide			-					
	that applies to your system. Not								
	categories, that person or entity								
	subscriber who pays extra for ca					d in the count ur	nder "Serv	ice to the	
	first set" and would be counted of Block 2: If your cable system	0			· · ·	convice that ar	different	from those	
	printed in block 1 (for example, t	-		•					
	with the number of subscribers a								
	sufficient.	,	0						
	BLC	DCK 1					BLOCI	٢2	
		NO. OF		DATE	047			NO. OF	
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEI	RVICE	SUBSCRIBERS	RA
			400	22.02					
	Service to first set		109	38.00					
	Service to additional set(s)								
	• FM radio (if separate rate)								
	Motel, hotel		18	1,642.00					
	Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA		SSIONS: RATE	S				
F	In General: Space F calls for rat								
Г	not covered in space E, that is, t								
Services	service for a single fee. There ar furnished at cost or (2) services	•			•		• •	,	
Other Than									
Secondary	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.								
ransmissions:	Block 1 : Give the standard rate charged by the cable system for each of the applicable services listed.								
Rates	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.								
	CATEGORY OF SERVICE	BLO RATE		GORY OF SER	/ICE	RATE	CATEG	BLOCK 2 ORY OF SERVICE	RA
	Continuing Services:			ation: Non-res			0,1120		
	• Pay cable		• Mc	otel, hotel					
	• Pay cable—add'l channel			mmercial					1
	Fire protection			y cable					
	•Burglar protection			y cable-add'l ch	annel				
	Installation: Residential			e protection					
	First set	50.00		rglar protection					
	Additional set(s)	24.95		services:					
	• FM radio (if separate rate)			connect		25.00			
	Converter			sconnect					
				itlet relocation		50.00			
			_	ove to new addre	200	50.00			

Namo	ounting Period: 2	2021/2			FORM SA1-2E. PAGE		
Ronan Telephone Company 633 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 76,56(d)(2) and (4), 76,61(e)(2) and (4), 07,66,81(e)(2) and (4), 07,66,81(e)(2) and (4), 07,66,81(e)(2) and (4), 07,66,81(e)(2) and (4)); and (2) certain stations carried on a substitute Basis stations: With respect to any distant stations carried by your cable system 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 parama basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute parama basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations 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 a cording to its over-the-air designation. For example, report multistream WETA-2' as the seame on the form. Column 2: Give the channel number the FCC assigned to the television station, or a noncommercial educational station, by entering the letter 'N' (for network multicast), 'T' (for independent), ''-N'' (for independent), ''-N	Name				SYSTEM ID		
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-line basis under FC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 76.56(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 paraies Stations: 'With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: b on tils the station here in space G — but do list it in space 1 (the Special Statement and Program Log)—If the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations: With respect to concerning substitute basis stations: With respect to concerning substitute basis stations. 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. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each multicast: 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 allocaritical multicast). For (for noncommercial educational), or F-AM' (for network), "N-M' (for network multicast), "I'' (for independent multicast). For the meaning of these terms, see page (iv) of the general instructions), if any give the name of the community to which the station is lidensified. <th></th><th>Ronan Telephone Cor</th><th>npany</th><th></th><th>6337</th>		Ronan Telephone Cor	npany		6337		
G 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 76.50(n)(2) and (4), 76.61(e)(2) and (4), 70.61(e)(2) and (4),		PRIMARY TRANSMITTERS:	TELEVISION				
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 also in space I, 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 multitast 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 nencommercial educational multicast). For the meaning of these terms, see page (v) 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 to which the station is identified. 1. CALL SIGN 2. B	_	carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under					
• 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. <i>Do not</i> 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, VRC 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 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 (v) of the general instructions in the paper SA1-2 form. Column 4: Give the location of each station, sit any, give the name of the community with 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.	smitters:	substitute program basis, as Substitute Basis Stations:	s explained in the next paragraph. With respect to any distant stations c				
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 		• Do not list the station here station was carried only on	e in space G—but do list it in space I (t a substitute basis.				
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" 		basis. For further information Column 1: List each station multicast stream associated	n concerning substitute basis stations s call sign. <i>Do not</i> report origination with a station according to its over-the	, see page (v) of the general instructio program services such as HBO, ESPN	ons. N, etc. Identify each		
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. 1. CALL SIGN 2. B'CAST CHANNEL NUMBER 3. TYPE OF STATION 4. LOCATION OF STATION KTMF 23 N MISSOULA, MT KPAX 8 N MISSOULA, MT KECI 13 N MISSOULA, MT		Column 2: Give the channe	el number the FCC assigned to the tele	evision station for broadcasting over th	ne air in its community		
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. 1. CALL SIGN 2. B'CAST CHANNEL NUMBER 3. TYPE OF STATION 4. LOCATION OF STATION KTMF 23 N MISSOULA, MT KPAX 8 N MISSOULA, MT As Necessary 13 N MISSOULA, MT		Column 3: Indicate in each educational station, by enter	case whether the station is a network ring the letter "N" (for network), "N-M"	(for network multicast), "I" (for indepen	ndent), "I-M"		
KTMF 23 N MISSOULA, MT KPAX 8 N MISSOULA, MT vs as Necessary KECI 13 N MISSOULA, MT		For the meaning of these ter Column 4: Give the location	rms, see page (iv) of the general instrunt of each station. For U.S. stations, lis	uctions in the paper SA1-2 form. t the community to which the station is	s licensed by the		
kTMF 23 N MISSOULA, MT KPAX 8 N MISSOULA, MT s as Necessary KECI 13 N MISSOULA, MT		1 CALL SIGN	2 B'CAST CHANNEL NUMBER	3 TYPE OF STATION	4 LOCATION OF STATION		
kPAX 8 N MISSOULA, MT hs Necessary KECI 13 N MISSOULA, MT							
Necessary KECI 13 N MISSOULA, MT							
		KPAX	8	N	MISSOULA, MT		
KUKL 46 E MISSOULA, MT Image: Source of the stress of the st	Necessary	KECI	13	Ν	MISSOULA, MT		
Image: Second		KUKL	46	E	MISSOULA, MT		
Image: Section of Sectio							
Image: Section of the section of th							
Image: Section of Sectio							
Image: Section of the section of th							
Image: Section of the section of th							
Image: Section of the section of th							
Image: Section of the section of th							
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		1					

EGAL NAME O Ronan Telej								SYSTEM I 633
	t every radio s	tation ca	rried on a separate and discr nerally receivable by your cab					Н
eceivable if (1) on the basis of For detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: C	it is carried by monitoring, to prmation abou rm. dentify the call tate whether t the radio stati this by placing Sive the statior	y the sys be recei t the Cc sign of e he static ion's sign g a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s opyright Office regulations on t each station carried. In is AM or FM. In al was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante this point, see pay ed by the cable s he station is licens	adend, and (2 nna, during c ge (v) of the g ystem as a se sed by the FC	ertain st ertain st eneral ir eparate 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	

Accounting Perio	d: 2021/2						FORM	A SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	Ronan Telephone Cor	npany						63377
		-	-				n aabla ava	
∎ Substitute	In General: In space I, iden substitute basis during the a explanation of the programm	accounting p	eriod, under sp	pecific present and former F	CC rules, reg	ulations, or a	uthorization	ns. For a further
Carriage:	1. SPECIAL STATEMEN				0			
Special	 During the accounting pe 	-			asis, anv nonr	etwork telev	ision proa	ram
Statement and	broadcast by a distant sta							
Program Log	-						YES	NO
	Note: If your answer is "No log in block 2.	o", leave the	rest of this pa	age blank. If your answer i	s "Yes," you r	nust comple	te the prog	jram
	2. LOG OF SUBSTITUT		MS					
	In General: List each subs			ate line. Use abbreviation	s wherever po	ossible, if the	eir meaning	g is
	clear. If you need more spa							
	Column 1: Give the title period, was broadcast by a			vision program ("substitut				
	under certain FCC rules, re							
	Do not use general catego							
		m was broa		er "Yes." Otherwise enter				
				asting the substitute prog				
	the case of Mexican or Cal		```````````````````````````````````````	the community to which the community with which the		,	e FCC or,	in
				stem carried the substitute			, with the n	nonth
	first. Example: for May 7 gi	ive "5/7."						
				ogram was carried by you				ately
	to the nearest five minutes stated as "6:00–6:30 p.m."	. Example: a	a program car	ried by a system from 6:0	1:15 p.m. to 6	:28:30 p.m.	snould be	
		ter "R" if the	listed prograr	n was substituted for prog	ramming that	your systen	n was <i>requ</i>	ired
	to delete under FCC rules	and regulati	ons in effect d	luring the accounting perio	od: enter the l	etter "P" if th	e listed pro	ogram
								-
	was substituted for program	mming that y						-
		mming that y						
	was substituted for prograr effect on October 19, 1976	mming that y		as permitted to delete und	der FCC rules	and regulat	ions in UTE RRED	7. REASON FOR
	was substituted for prograr effect on October 19, 1976	UBSTITUT	your system w	as permitted to delete und	der FCC rules	and regulat	UTE RRED MES	
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w <u>E PROGRAM</u> 3. STATION'S	ras permitted to delete und	der FCC rules WHE CARRI 5. MONTH	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR

Accounting Period:	2021/2	FORM SA	1-2E. PAGE 6.
Nome	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	YSTEM ID#
Name	Ronan Telephone Company		63377
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En 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 amount, see	9,168.00 ss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form 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 accounting period is \$52.00	this six-mon	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	\$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	1. Base amount under statutory formula \$ 263,800.00		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527	,600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula \$ 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 DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		hts!

Accounting Period:	2021/2				FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF C Ronan Telepho	DWNER OF CABLE SYSTEM: DNE Company			SYSTEM ID# 63377
M Channels	to its subscribers 1. Enter the total system carried 2. Enter the total on which the ca	s, and (2) the cable system's I number of channels on whic television broadcast stations I number of activated channe able system carried televisior	5	ng the accounting period.	13 143
N Individual to Be Contacted		BE CONTACTED IF FURT	ER INFORMATION IS NEEDED (Iden t.)	tify an individual to whom	
for Further Information	Name	Michelle Marengo		Telephone	(406) 676-9218
	Address	312 Main St SW (Number, street, rural route, apar Ronan, MT 59864 (City, town, state, zip)	nent, or suite number)		
	Email	michellem@ro	an.net	Fax (optional) (406) 676-88	89
O Certification	I, the undersigned (Ownee X (Agenting (Afficial of the second of	ed, hereby certify that (Check er other than corporation or t of owner other than corpor line 1 of space B and that the er or partner) I am an officer line 1 of space B. d the statement of account and e, and correct to the best of m	ust be certified and signed in accordan ine, <i>but only one</i> , of the boxes.) artnership) I am the owner of the cable ition or partnership) I am the duly auth where is not a corporation or partnership; if a corporation) or a partner (if a partner hereby declare under penalty of law tha knowledge, information, and belief, and knowledge, information, and knowledge, information, and knowl	system as identified in line 1 of space orized agent of the owner of the cable of or rship) of the legal entity identified as ow t all statements of fact contained herein are made in good faith.	system as identified /ner of the cable system
		Title: (Title of	Accounting Manager ficial position held in corporation or partnership)	
		Date:		01/28/2022	

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.

ounting Period: 2021/2	FORM SA1-2E. PAGE 8
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
nan Telephone Company	6337
 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? 	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name Name Mailing Address Mailing Address	
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. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
x days	
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 in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
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 the form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and 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.