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				
08/29/2024	\$ 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	COUNTING PERIOD	COVERED BY THIS STATEMENT: (YYYY/(Period))	
	2024/1	Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
Accounting		Barcode Data Filing Period (optional - see instructions)	
Period			
В	-	of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate of that of the parent corporation.	
Owner	List any other name or na	names under which the owner conducts the business of the cable system.	
		wners during the accounting period, only the owner on the last day of the accounting period should submit a unt and royalty fee payment covering the entire accounting period.	
	Check here if this is the sy	system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	10029
	LEGAL NAME OF OV	WNER/MAILING ADDRESS OF CABLE SYSTEM	
	CableSouth Media III,	, LLC	
	BUSINESS NAME(S)	OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
	MAILING ADDRESS O	OF OWNER OF CABLE SYSTEM	
	1615 Poydras St		
	New Orleans, LA		
С		give any business or trade names used to identify the business and operation of the system pace B. In line 2, give the mailing address of the system, if different from the address given in	
System	IDENTIFICATION OF CAR		
5, 5.6	Swyft Connect		
	MAILING ADDRESS OF O	CABLE SYSTEM:	
	(Number, street, rural route, a	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 suffciency of the fling, a determination that would be made by a court of law.

CableSouth Media III, LLC Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC r "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including sin 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 k 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 identified city. CITY OR TOWN STATE Fordyce AR			FORM SA1-2E. PAG					
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"a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including sin 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 k 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 identified city. CITY OR TOWN STATE Fordyce AR			100					
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Area Served Area Served CITY OR TOWN First Community Community Community STATE Fordyce AR Community STATE Fordyce AR	D							
Area Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city. CITY OR TOWN STATE First Fordyce AR Community		discrete unincorporated areas). 47 C.F.K. 76.5(dd). The first community that you list will serve as a form of system identification is						
Area Served identified city. CITY OR TOWN STATE First Fordyce AR Community								
Served identified city. CITY OR TOWN STATE First Community Community	Aroa		mobile home parks should be reported in parentheses below the					
First Fordyce AR Community		identified city.						
First Community AR								
First Community AR								
Community		CITY OR TOWN	STATE					
Community	First	Fordyce	AR					
	Community							
Rosa sheesing and a second and								
	d Bows as Nosossani							
	a Rows as Necessary							
			111111111111111111111111111111111111111					

Accounting Period: 2024/1
FORM SA1-2E. PAGE 2.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CableSouth Media III, LLC

SYSTEM ID# 10029

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		BLOCK 2			
	NO. OF			NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:						
Service to first set	18	32.85				
 Service to additional set(s) 						
• FM radio (if separate rate)						
Motel, hotel						
Commercial						
Converter						
Residential						
Non-residential					0	
				 	(

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		Motel, hotel			
 Pay cable—add'l channel 		Commercial			
Fire protection		• Pay cable			
 Burglar protection 		 Pay cable-add'l channel 			
Installation: Residential		Fire protection			
• First set	150.00	Burglar protection			
Additional set(s)		Other services:			
 FM radio (if separate rate) 		Reconnect	150.00		
Converter	5.00	Disconnect			
		Outlet relocation			
		 Move to new address 	150.00		

Accounting Period: 2024/1 FORM SA1-2E. PAGE 3.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 10029

CableSouth Media III, LLC

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
KETS	2	E	Little Rock, AR
KKYK	3	<u> </u>	Little Rock, AR
KARK	4	N	Little Rock, AR
KASN	6	N	Little Rock, AR
KATV	7	N	Little Rock, AR
KLRT	8	N	Little Rock, AR
KARZ	9	l	Little Rock, AR
KTVE	10	N	El Dorado, AR
KTHV	11	N	Little Rock, AR
KTVN	12		Little Rock, AR
KKYK	13	l	Little Rock, AR
WGN	19	I	Chicago, IL

Accounting Period: 2024/1	FORM SA1-2E. PAGE 4.
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LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

CableSouth Media III, LLC

10029

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
						[
						ļ	
						[
						 	
						ļ	
						l	
		 					

Accounting Perio	nd: 2024/1							EOD	M SA1-2E. PAGE 5.
Accounting Ferro	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					FOR	SYSTEM ID#
Name	CableSouth Media III,	LLC							10029
1	SUBSTITUTE CARRIAG In General: In space I, ident substitute basis during the a	ify every no	nnetwork telev	ision prog	gram, broadcast by	a distant sta			
Substitute	explanation of the programm	٠.							
Carriage:	1. SPECIAL STATEMEN	T CONCER	RNING SUBS	TITUTE	CARRIAGE				
Special Statement and	nent and								
Program Log									
	log in block 2.	,	•	J	•				
	2. LOG OF SUBSTITUTI		-						
	In General: List each subs clear. If you need more spa					s wherever p	ossible, if	their meanin	g is
	Column 1: Give the title					e program") tl	hat, durin	g the accoun	ting
	period, was broadcast by a	distant sta	tion and that y	our cable	e system substitut	ed for the pro	ogrammir	ng of another	station
	under certain FCC rules, re Do not use general categor				0 ()				
	"NBA Basketball: 76ers vs.	Bulls."					' '	,	
	Column 2: If the program Column 3: Give the call		,						
	Column 4: Give the broa						censed by	y the FCC or,	in
	the case of Mexican or Car							و مطاح المناسب	an a m th
	Column 5: Give the mor first. Example: for May 7 gi	,	wnen your sy	stem car	ried the substitute	e program. U	se numer	ais, with the i	montn
	Column 6: State the tim	es when the							
	to the nearest five minutes stated as "6:00–6:30 p.m."	. Example:	a program car	ried by a	system from 6:01	1:15 p.m. to 6	5:28:30 p.	m. should be	
	Column 7: Enter the lett								
	to delete under FCC rules a was substituted for prograr								rogram
	effect on October 19, 1976	•	your system w	as perm	illed to delete und	iei i oo iules	s and regu		
	e e	I IDOTITI IT	E PROGRAM	1			N SUBS	TITUTE CURRED	7. REASON FOR
			3. STATION'S	I		5. MONTH		TIMES	DELETION
	TITLE OF PROGRAM	Yes or No	CALL SIGN		TION'S LOCATION	AND DAY	FROM	— то	
				 					···
				 					
				 					
								_	
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								_	
									""
				 					
								_	
									

Accounting Period:	2024/1		A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CableSouth Media III, LLC	S	10029
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a further explanation of how to compute this 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.	mission service	
	IMPORTANT: You must complete a statement in space P concerning gross 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 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.	\$263,80(
	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 t accounting period is \$52.00	his 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	00)	
	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 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)	
	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		
	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 # 2791FML1		
	<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 mo		

Accounting Period:	2024/1					FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF O	WNER OF CABLE SYSTEM: dia III, LLC				SYSTEM ID# 10029
M Channels	to its subscribers, 1. Enter the total system carried t	and (2) the cable system's to number of channels on which elevision broadcast stations.		els during the acc	counting period.	12
	on which the ca	number of activated channels ble system carried television t ast services				132
N Individual to Be Contacted		BE CONTACTED IF FURTHI	ER INFORMATION IS NEEDE	ED (Identify an ind		
for Further Information	Name	Richard Gray			Telephon	504-296-7424
	Address	1615 Poydras St. Suit (Number, street, rural route, apartm New Orleans, LA 701 (City, town, state, zip)	ent, or suite number)			
	Email	regulatory@swy	ftconnect.com		Fax (optional)	
0	CERTIFICATION (This statement of account mu	st be certified and signed in a	ccordance with C	opyright Office regulations)
Certification	• I, the undersigne	d, hereby certify that (Check or	ne,but only one, of the boxes.)			
	(Owner	other than corporation or pa	artnership) I am the owner of t	he cable system a	s identified in line 1 of spac	e B; or
	in li	ne 1 of space B and that the ov	tion or partnership) I am the o wner is not a corporation or par	tnership; or		
	in li	ne 1 of space B.	a corporation) or a partner (if a			·
		, and correct to the best of my	nereby declare under penalty o knowledge, information, and be			ein
			X /s/ Richard Gra	у		_
			Enter an electronic signature on Enter signature using an "/s/ sig		•	
		Typed or printed	name: Richard Gray			
		Title: (Title of off	Chief Financial Office			
		Date:			8/29/24	

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.

Accounting Period: 2024/1	FORM SA1-2E. PAGE 8.
EGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
CableSouth Media III, LLC	10029
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."	P Special Statement Concerning Gross Receipts Exclusion
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?	
X NO YES. Enter the total here and list the satellite carrier(s) below	
	_
Name Mailing Address Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
x	
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@copyright.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	
, tau occ	
ID number First community served Accounting period	

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