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			
8/16/24	\$			
	ALLOCATION NUMBER			

Return completed workbook by email to

#### coplicsoa@copyright.gov

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

Α	COUNTING PERIOD COVERED BY THIS STATEMENT: (YY	Y/(Period))
	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31
	20211 Barcode Data Filing Period (optional - s	ee instructions)
Accounting Period		
В	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiar of the subsidiary, not that of the parent corporation.	ry of another corporation, give the full corporate title
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 single statement of account and royalty fee payment covering the entire accounting	
	Check here if this is the system's first filing. If not, enter the system's ID number as	igned by the Licensing Division.
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
	WideOpenWest, Inc.	
	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
	HC Cable OPCO LLC	
	MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
	7887 E. Belleview Ave., Ste. 1000 (Number, street, rural route, apartment, or suite number)	
	Englewood, CO 80111-6007	
С	<b>RUCTIONS:</b> In line 1, give any business or trade names used to identies already appear in space B. In line 2, give the mailing address of the	, ,
System	IDENTIFICATION OF CABLE SYSTEM:	
	Nulink Digital  MAILING ADDRESS OF CABLE SYSTEM:	
	(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 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 filling, a determination that would be made by a court of law.

Name WideOpenWest, Inc.  Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC ru "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including sing 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 known 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  Newnan GA Coweta County GA Fayette County GA			FORM SA1-2E. PAG
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC ru "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including sing 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 known 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  Newnan  Coweta County  Fayette County  Fayette County  Palmetto  Peachtree City  GA  GA  GA  GA  GA  GA  GA  GA  GA  G	Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
"a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including sing 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 known 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  Newnan  Coweta County  Fayette County  Fayette County  Palmetto Peachtree City  GA  GA  GA  GA  GA  GA  GA  GA  GA  G	Nume		629
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 known 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  Newnan GA Community Coweta County Fayette County Fayette County Palmetto Peachtree City GA		Instructions: List each separate community served by the cable system. A "communi	ty" is the same as a "community unit" as defined in FCC rule
Area Served identified city.  CITY OR TOWN STATE  First Newnan GA  Community Coweta County GA  Fayette County GA  Rows as Necessary Palmetto GA  Peachtree City GA	D	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list as the "first community." Please use it as the first community on all future filings.	will serve as a form of system identification hereafter knov
CITY OR TOWN   STATE     First   Newnan   GA     Community   Coweta County   GA     Fayette County   GA     Rows as Necessary   Palmetto   GA     Peachtree City   GA			ome parks should be reported in parentheses below the
First         Newnan         GA           Community         Coweta County         GA           Fayette County         GA           Rows as Necessary         Palmetto         GA           Peachtree City         GA	551754		
Community Coweta County GA Fayette County GA  Rows as Necessary Palmetto GA Peachtree City GA			
Rows as Necessary Palmetto Peachtree City  GA  GA  GA  GA  GA			
Rows as Necessary Palmetto GA Peachtree City GA	Community		GA
Peachtree City GA		Fayette County	GA
	d Rows as Necessary	Palmetto	GA
		Peachtree City	GA
			GA
			1 0111011111111111111111111111111111111

Accounting Period: 2024/1

FORM SA1-2E. PAGE 2

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

WideOpenWest, Inc.

SYSTEM ID# 62965

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.

BLO	OCK 1		BLOCI	₹2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
Service to first set	1,082	35.00			
Service to additional set(s)					
• FM radio (if separate rate)					
Motel, hotel					
Commercial	6	35.00			
Converter					
Residential	1,042	2.00-30.00			
Non-residential					
		T		1	1

F

Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable	10.99-17.00	Motel, hotel		Expanded Service	65.00
<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial		Digital Basic	10.00
Fire protection		• Pay cable		SportsPak	4.95
•Burglar protection		<ul> <li>Pay cable-add'l channel</li> </ul>			
Installation: Residential		Fire protection			
• First set	10.00-99.00	Burglar protection			
<ul> <li>Additional set(s)</li> </ul>		Other services:			
<ul> <li>FM radio (if separate rate)</li> </ul>		Reconnect	40.00		
Converter		Disconnect	50.00		
		Outlet relocation	20.00		
		<ul> <li>Move to new address</li> </ul>	30.00		

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 62965

Primary Transmitters: Television

G

PRIMARY TRANSMITTERS: TELEVISION

WideOpenWest, Inc.

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
WAGA	27	N	Atlanta, GA
WAGA-2	27	N-M	Atlanta, GA
WAGA-3	27	N-M	Atlanta, GA
WAGA-simulcast	27	N-M	Atlanta, GA
WATL	25	N	Atlanta, GA
WATL-2	25	N-M	Atlanta, GA
WATL-simulcast	25	N	Atlanta, GA
WANF	19	N	Atlanta, GA
WANF-2	19	N-M	Atlanta, GA
WANF-3	19	N-M	Atlanta, GA
WANF-simulcast	19	N	Atlanta, GA
WGTV	7	E	Athens, GA
WGTV-2	7	E-M	Athens, GA
WGTV-3	7	E-M	Athens, GA
WGTV-simulcast	7	E	Athens, GA
WPBA	21	E	Atlanta, GA
WPBA-simulcast	21	E	Atlanta, GA
WPCH	17	l	Atlanta, GA
WPCH-simulcast	17	l	Atlanta, GA
WPXA	14	N	Rome, GA
WPXA-simulcast	14	N	Rome, GA
WSB	2	N	Atlanta, GA
WSB-2	2	N-M	Atlanta, GA
WSB-3	2	N-M	Atlanta, GA

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

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

WideOpenWest, Inc.

62965

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.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
WSB-simulcast	2	N	Atlanta, GA
WUPA	36	N	Atlanta, GA
WUPA-2	36	N-M	Atlanta, GA
WUPA-simulcast	36	N	Atlanta, GA
WXIA	10	N	Atlanta, GA
WXIA-2	10	N-M	Atlanta, GA
WXIA-3	10	N-M	Atlanta, GA
WXIA-simulcast	10	N	Atlanta, GA

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

WideOpenWest, Inc. 62965

#### 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
		_					

counting Perio	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:						SYSTEM ID
Name	WideOpenWest, Inc.								6296
	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G				
ı	In General: In space I, iden	tify every nor	nnetwork televi	ision program, broadcast by	a distant stat	tion, that y	our ca	ble syst	em carried on a
Substitute	substitute basis during the a								
Carriage:	explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE								
Special				m carry, on a substitute ba	sis, any nonr	etwork te	elevisio	n progr	ram
tatement and Program Log	broadcast by a distant sta			\	/ES	X NO			
5 5	Note: If your answer is "No	o " leave the	rest of this pa	age blank. If your answer is	s "Yes " vou r	nust com			
	log in block 2.	o, .ou.oo		.go 2.a you. ao	, ,		p.010 t.	p	
	2. LOG OF SUBSTITUT	E PROGRA	MS						
	In General: List each subs				wherever po	ossible, if	their n	neaning	j is
	clear. If you need more spa			I rows to the tables. vision program ("substitute	nrogram") th	act durin	a tha a	ooounti	na
	period, was broadcast by a								
	under certain FCC rules, re	egulations, c	or authorizatio	ns. See page (v) of the ger	neral instructi	ions for fu	ırther i	nformat	tion.
	Do not use general catego "NBA Basketball: 76ers vs		vies" or "bask	etball." List specific progra	m titles, for e	example,	"I Love	Lucy"	or
			dcast live, ent	er "Yes." Otherwise enter "	No."				
	Column 3: Give the call	sign of the	station broado	casting the substitute progr	am.				
	Column 4: Give the bro the case of Mexican or Ca			the community to which the			the F	CC or,	in
				stem carried the substitute			als. wit	th the m	nonth
	first. Example: for May 7 g	ive "5/7."	, ,				•		
				ogram was carried by your					ately
	to the nearest five minutes stated as "6:00–6:30 p.m."		a program car	ried by a system from 6:01	:15 p.m. to 6	:28:30 p.i	m. sno	uia be	
			listed prograr	n was substituted for progr	amming that	your sys	tem wa	as requ	ired
	to delete under FCC rules		ons in effect d	luring the accounting perio	d: antar tha l	attar "D" i	f the lie	sted pro	
									ogram
	. •		your system w	as permitted to delete und					ogram
	effect on October 19, 1976		our system w						ogram
	effect on October 19, 1976	S	•	as permitted to delete und	er FCC rules WHE	and regu	lations TITUT	s in E	
	effect on October 19, 1976	SUBSTITUT	E PROGRAM	as permitted to delete und	er FCC rules WHE CARRI	and regu N SUBS AGE OC	ulations TITUT CURR	E RED	
	effect on October 19, 1976	S	E PROGRAM	as permitted to delete und	er FCC rules WHE	and regu N SUBS AGE OC	lations TITUT	E RED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON F
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
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	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	and regu N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	and regu N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	and regu N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	and regu N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	and regu N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO
	effect on October 19, 1976	SUBSTITUT	E PROGRAM  3. STATION'S	ras permitted to delete und	WHE CARRI.	and regu N SUBS AGE OC	TITUT CURR TIMES	E E ED	7. REASON FO

Accounting Period:	2024/1			FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: WideOpenWest, Inc.			SYSTEM ID# 62965
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file all amounts (gross receipts) paid to your cable system by subscribers for the (as identified in space E) during the accounting period. For a further explana 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	e system's tion of how	secondary trans v to compute this	mission service
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 \$137,10 Use block 3 if the amount of gross receipts in space K is more than \$263,80 See page (vi) of the general instructions located in the paper SA1-2 form for more	0 but less	than \$527,600	\$263,800
	BLOCK 1: GROSS RECEIPTS OF \$13	7,100 OR	LESS	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royal accounting period is \$52.00.	ty fee that y	ou must pay for t	his 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
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add li	nes 1 and 2	2	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LE	SS (but m	ore than \$137,1	00)
	Base amount under statutory formula	. \$	263.800.00	
	Enter amount of gross receipts from space K			
	3. Subtract line 2 from line 1			
	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 \$26	3,800 (but	less than \$527,	600)
	Enter the amount of gross receipts from space K	\$	451,012.43	
		. *		
	Base amount under statutory formula	\$	263,800.00	
	3. Subtract line 2 from line 1	\$	187,212.43	
	4. Multiply line 3 by .01		\$	1,872.12
	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	I, 5, and 6 .		\$ 3,191.12
	FILING FEE AND TOTAL REMITTANCE DU	JE		
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)		. \$	3,191.12
_40	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			\$ 3,211.12
	EFT Trace # or TRANSACTION ID #			
	Important: Your remittance must be in the form of an electronic pay See page i of the general instructions in the paper SA1-2 form and the			

Accounting Period:	2024/1	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: WideOpenWest, Inc.	SYSTEM ID# 62965
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period.  1. Enter the total number of channels on which the cable system carried television broadcast stations	32
	Enter the total number of activated channels     on which the cable system carried television broadcast stations     and nonbroadcast services	337
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual we can contact about this statement of account.)	
for Further Information	Name Bill Lam Telephone 720-2  Address 7887 E. Belleview Ave., Suite 1000  (Number, street, rural route, apartment, or suite number)	38-2844
	Englewood, CO 80111  (City, town, state, zip)	
	Email bill.lam@wowinc.com Fax (optional)	
O Certification	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)  I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)  (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system 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 legal entity identified as owner of the space of the legal entity identified as owner of the legal entity identified entities the legal	
	in line 1 of space B.  I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.  [18 U.S.C., Section 1001(1986)]	,
	Enter an electronic signature on the line above to certify this statement.  Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	
	Typed or printed name: Teresa Elder	
	Title: Chief Executive Officer  (Title of official position held in corporation or partnership)	
	Date: August 16, 2024	

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

counting Period: 2024/1	FORM SA1-2E. PAGE 8
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID:
deOpenWest, Inc.	62965
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 lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the baservice of providing secondary transmissions of primary broadcast transmitters, the system shall not inclused a scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section.	asic ude sub-  Special Statement
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 transmember made by satellite carriers to satellite dish owners?	issions
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 underpose.	ayment
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2	
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
x	days
Line 3 Multiply line 2 by the number of days late and enter the sum here	<del>-</del> 74
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	<u>-</u>
(interest ch	<i>3</i> ,
* To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For further assistance contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	e please
** 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 list below the owner, address, first community served, ID number, and accounting period as given in the original	•
Owner	
Address	
ID number	0.00.00.00.00.00.00.00.00.00.00.00.00.0
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 th 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 filing, a determination that would be made by a court of law.

U.S. Copyright Office Form SA1-2E Short Form (Rev. 05-17)