THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011 If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2 Short Form

				Return to:		
STATEM	ENT OF ACCOUNT	FOR COPYRIGH	IT OFFICE USE ONLY	Library of Congress Copyright Office		
	ary Transmissions by	DATE RECEIVED	AMOUNT	Licensing Division		
Cable Syste	ems (Short Form)			101 Independence Ave. SE		
General instru	ictions are at the		\$	Washington, DC 20557-6400 (202) 707-8150		
end of this form [pages (i)-(vii)].		08/29/2017	ALLOCATION NUMBER	For courier deliveries,		
				see page ii of the general instructions		
Α	ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT:				
Accounting Period	January - June 2017					
В	Instructions: Your file has been established	•	 If there are any changes, draw a line the second sec	hrough the		
Owner	incorrect information and print or type the o Give the full legal name of the owner of		subsidiary of another corporation, give t	the full corpo-		
	rate title of the subsidiary, not that of the pa	arent corporation.				
	List any other name or names under v		ss of the cable system.			

	<i>a single statement of account and royalty fe</i> Check here if this is the system's firs		<i>ounting period.</i> number assigned by the Licensing Division.	40117				
	LEGAL NAME OF OWNER/MAILING ADD Atlantic Broadband (SC) LL							
			*	04011720171 [°]				
				040117 2017/1				
	2 Batterymarch Park, Suite Quincy, MA 02169	205						
С			dentify the business and operation of the sys f the system, if different from the address give					
System	1 IDENTIFICATION OF CABLE SYSTEM: Atlantic Broadband							
	MAILING ADDRESS OF CABLE SYSTEM: 520 Pine Log Road 2 (Number, street, rural route, apartment, or suite m							
	Aiken, SC 29803 (City, town, state, zip code)							
D Area	in FCC rules: "a separate and distinct c areas and including single, discrete uni	community or municipal entitiy (in ncorporated areas)." 47 C.F.R.	m. A "community" is the same as a "communiculating unincorporated communities within a 76.5(dd). The first community that list will s se use it as the first community on all future for the first community on all future first community on a	unincorporated erve as a form				
Served			s, or mobile home parks should be reported i					
	CITY OR TOWN	STATE	CITY OR TOWN	STATE				
First	City of Bamberg	SC						
Community	Bamberg County (un-incorp)	SC						
	Denmark	SC						

search reports prepared for the public. The effects 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.

Form SA1-2c Rev 04/2011

News	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:						SYS	TEM ID	
Name	Atlantic Broadband (SC) LLC							04011	
-	SECONDARY TRANSMISSION	SERVICE: SU	BSCR	BERS AND RA	ATES					
Ε	In General: The information in s	•		•	-					
. .	system, that is, the retransmission									
Secondary Fransmission	about other services (including p last day of the accounting period						hose existi	ng on the		
Service: Sub-	Number of Subscribers: Both						ble svstem.	broken		
scribers and	down by categories of secondary	•					•			
Rates	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									
	unit in which it is generally billed. category, but do not include disc				ny standar	d rate variation	s within a p	articular rate		
	Block 1: In the left-hand block				ies of seco	ondarv transmis	sion servic	e that cable		
	systems most commonly provide	•		-		•				
	that applies to your system. Note			-		-				
	categories, that person or entity									
	subscriber who pays extra for ca first set" and would be counted o					in the count un	ider "Servic	e to the		
	Block 2: If your cable system h	0			()	service that are	different fr	om 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.									
	BLOCK 1					BLOCK 2				
	CATEGORY OF SERVICE	SUBSCRIBI		RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RATE	
	Residential:									
	Service to first set		569	31.99	Expand	led Basic		528	70.9	
	 Service to additional set(s) 				Digital			193	76.9	
	• FM radio (if separate rate)				Digital			122	96.9	
	Motel, hotel			4.37						
	Commercial		25	38.34						
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC									
F	In General: Space F calls for rat	•	,		•	• •				
•	not covered in space E, that is, the service for a single fee. There are									
Services	furnished at cost or (2) services of		,		0		0()			
Other Than	amount of the charge and the un									
Secondary	enter only the letters "PP" in the	rate column.				-		0		
ransmissions:	Block 1: Give the standard rate									
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 senarate charge was made or established. List these other services in the form of a									
	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	BLO0 RATE		GORY OF SER	VICE	RATE	CATEC	BLOCK 2 ORY OF SERVICE	DATE	
	CATEGORT OF SERVICE	RAIE		ation: Non-res		RAIE	CATEG	JRT OF SERVICE	RATE	
	Continuing Services:		mətan							
	Continuing Services:	19 99	• Mc	tel hotel			HBO		19 9	
	• Pay cable	19.99		itel, hotel			HBO Showti	me		
	• Pay cable • Pay cable—add'l channel	19.99	۰Co	mmercial			Showti		19.9 19.9	
	 Pay cable Pay cable—add'l channel Fire protection 	19.99	•Co •Pa	mmercial y cable			Showti Cinema	ax	19.9 19.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection 	19.99	•Co •Pa •Pa	mmercial y cable y cable-add'l ch			Showti Cinema MovieF	ax Ylex	19.9 19.9 9.0	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential 		∙Co ∙Pa ∙Pa ∙Fir	mmercial y cable y cable-add'l ch e protection	nannel		Showti Cinema MovieF 2 Prem	ax Plex ium	19.9 19.9 9.0 38.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set 	40.00	∙Co ∙Pa ∙Pa ∙Fir ∙Bu	mmercial y cable y cable-add'l ch e protection rglar protection	nannel		Showti Cinema MovieF 2 Prem 3 Prem	ax Plex ium ium	19.9 19.9 9.0 38.9 55.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) 		∙Co ∙Pa ∙Pa ∙Fir ∙Bu Other	mmercial y cable y cable-add'l ch e protection rglar protection services:	nannel		Showti Cinema MovieF 2 Prem	ax Plex ium ium	19.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 	40.00	∙Co •Pa •Pa •Fir •Bu Other ∙Re	mmercial y cable y cable-add'l ch e protection rglar protection services: connect	nannel	40.00	Showti Cinema MovieF 2 Prem 3 Prem	ax Plex ium ium	19.9 19.9 9.0 38.9 55.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) 	40.00	• Co • Pa • Fir • Bu Other • Re • Dis	mmercial y cable y cable-add'l ch e protection rglar protection services: connect sconnect	nannel		Showti Cinema MovieF 2 Prem 3 Prem	ax Plex ium ium	19.9 19.9 9.0 38.9 55.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 	40.00	•Co •Pa •Fir •Bu • Other •Dis •Ou	mmercial y cable y cable-add'l ch e protection rglar protection services: connect	nannel	40.00	Showti Cinema MovieF 2 Prem 3 Prem	ax Plex ium ium	19.9 19.9 9.0 38.9 55.9	

G In ca FC Primary nsmitters: elevision ba • [• L Th as thu ecc (fo Fc	arried by your cable syst CC rules and regulations 5.59(d)(2) and (4), 76.61 ubstitute program basis, Substitute Basis Stat asis under specific FCC r Do not list the station he station was carried only List the station here, and basis. For further inforr Column 1: List each si Column 2: Give the nu- nis may be different from ssociated with a station as e same on the form. Column 3: Indicate in ducational station, by en or independent multicast or the meaning of these Column 4: Give the lo	S: TELEVISION dentify every televisio em during the accour s in effect on June 24 (e)(2) and (4), or 76.6 as explained in the n ions: With respect to rules, regulations, or a re in space G—but do y on a substitute basi d also in space I, if the mation concerning su umber of the channel n the channel on whic according to its over-t each case whether th tering the letter "N" (fi t), "E" (for noncomme terms, see page (iv) of cation of each station	nting period, excee , 1981, permitting 63 (referring to 76 ext paragraph. any distant static authorizations: b list it in space 1 is s. e station was carri- bstitute basis stat not report originat on which the stat h your cab;e syst hje-air designation e station is a netto or network), "N-M rcial educational) of the general inst . For U.S. station	the carriage of certain network programs [sections i.61(e)(2) and (4))]; and (2) certain stations carried on a ons carried by your cable system on a substitute program (the Special Statement and Program Log)—if the ied both on a substitute basis and also on some other ions, see page (v) of the general instructions. ion program services such as HBO, ESPN, etc. ion's broadcasts are carried in its own community. em carried the station. Identify each multicast stream n. For example, report multicast stream "WETA-2" as work station, an independent station, or a noncommercial " (for network multicast), "I" (for independent), "I-M" , or "E-M" (for noncommercial educational multicast). tructions. s, list the community to which the station is licensed by the	04011	
G In ca FC Primary nsmitters: elevision ba • [• L Th as thu ecc (fo Fc	General: In space G, id arried by your cable syst CC rules and regulations 5.59(d)(2) and (4), 76.61 ubstitute program basis, Substitute program basis, asis under specifc FCC r Do not list the station he station was carried onl List the station here, and basis. For further inforr Column 1: List each s' Column 2: Give the nu- nis may be different from sociated with a station a e same on the form. Column 3: Indicate in ducational station, by en or independent multicast or the meaning of these Column 4: Give the low	dentify every televisio em during the accour s in effect on June 24 (e)(2) and (4), or 76.4 (e)(2) and (e)(2) and (e)(2) (e)(2) and (e)(2) and (e)(2) (e)(nting period, excee , 1981, permitting 63 (referring to 76 ext paragraph. any distant static authorizations: b list it in space 1 is s. e station was carri- bstitute basis stat not report originat on which the stat h your cab;e syst hje-air designation e station is a netto or network), "N-M rcial educational) of the general inst . For U.S. station	pt (1) stations carried only on a part-time basis under the carriage of certain network programs [sections (.61(e)(2) and (4))]; and (2) certain stations carried on a ons carried by your cable system on a substitute program (the Special Statement and Program Log)—if the ied both on a substitute basis and also on some other tions, see page (v) of the general instructions. ion program services such as HBO, ESPN, etc. ion's broadcasts are carried in its own community. em carried the station. Identify each multicast stream n. For example, report multicast stream "WETA-2" as work station, an independent station, or a noncommercial " (for network multicast), "I" (for independent), "I-M" , or "E-M" (for noncommercial educational multicast). tructions. s, list the community to which the station is licensed by the		
C ca Frimary 76 nsmitters: su elevision ba • [• L Th as the content of the formation of th	arried by your cable syst CC rules and regulations 5.59(d)(2) and (4), 76.61 ubstitute program basis, Substitute Basis Stat asis under specific FCC r Do not list the station he station was carried only List the station here, and basis. For further inforr Column 1: List each si Column 2: Give the nu- nis may be different from ssociated with a station as e same on the form. Column 3: Indicate in ducational station, by en or independent multicast or the meaning of these Column 4: Give the lo	em during the accour s in effect on June 24 (e)(2) and (4), or 76.6 as explained in the n ions: With respect to rules, regulations, or a re in space G—but d y on a substitute basi d also in space I, if the mation concerning su tation's call sign. Do n unber of the channel n the channel on whic according to its over-t each case whether th tering the letter "N" (fi t), "E" (for noncomme terms, see page (iv) of cation of each station	nting period, excee , 1981, permitting 63 (referring to 76 ext paragraph. any distant static authorizations: b list it in space 1 is s. e station was carri- bstitute basis stat not report originat on which the stat h your cab;e syst hje-air designation e station is a netto or network), "N-M rcial educational) of the general inst . For U.S. station	pt (1) stations carried only on a part-time basis under the carriage of certain network programs [sections (.61(e)(2) and (4))]; and (2) certain stations carried on a ons carried by your cable system on a substitute program (the Special Statement and Program Log)—if the ied both on a substitute basis and also on some other tions, see page (v) of the general instructions. ion program services such as HBO, ESPN, etc. ion's broadcasts are carried in its own community. em carried the station. Identify each multicast stream n. For example, report multicast stream "WETA-2" as work station, an independent station, or a noncommercial " (for network multicast), "I" (for independent), "I-M" , or "E-M" (for noncommercial educational multicast). tructions. s, list the community to which the station is licensed by the		
_	 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 specifc 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. Column 2: Give the number of the channel on which the station's broadcasts are carried in its own community. This may be different from the channel on which your cab; system carried the station. Identify each multicast stream associated with a station according to its over-thje-air designation. For example, report multicast stream "WETA-2" as the same on the form. 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. Column 4: Give the location of each station. For U.S					
			give the nume of			
1.	. CALL	2. B'CAST	3. TYPE	6. LOCATION OF STATION		
	SIGN	CHANNEL	OF			
w	/AGT	NUMBER 30.4	STATION N	Augusta, GA		
	/AGT-CW	30.3	N	Augusta, GA		
	/CES	6.1	E	Wrens, GA		
	/EBA	33.1	E	Allendale, SC		
	/EBA-SCC	33.2	E	Allendale, SC		
	/EBA-WORLD	33.3	E	Allendale, SC		
	/FXG	54.1	⊢ N			
				Augusta, GA		
	/FXG/Bounce	54.2	N	Augusta, GA		
v	/JBF	42.1	N	Augusta, GA		
N	/JBF/MeTV	42.2	N	Augusta, GA		
	/RDW	12.1	N	Augusta, GA		
	/RDW Antenna	12.3	N	Augusta, GA		
	/RDW-MyTV	12.2	N	Augusta, GA		
	/FXG GRIT	54.3	N	Augusta, GA		

ACCOUNTING PERIOD: 2017/1

FORM SA1-2. F LEGAL NAME OI		CABLE S	/STEM:				SYSTEM ID#	NG PERIOD: 2017/
Atlantic Bro	adband (So	C) LLC					040117	
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
receivable if (1) on the basis of i For detailed info Column 1: lo Column 2: S Column 3: If signal, indicate Column 4: G	it is carried by monitoring, to prmation about dentify the call state whether to the radio stat this by placing Sive the station	y the sys be receivent t the the sign of e the statio ion's sign g a check n's locatio	-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s Copyright Office regulations of each station carried. In is AM or FM. hal was electronically process mark in the "S/D" column. on (the community to which the the community with which the	t the system's hea system's FM ante on this point, see ed by the cable s as station is licens	adend, and (2) nna, during ce page (v) of the ystem as a se red by the FCC) it can b ertain sta e genera parate a	e expected, ted intervals. I instructions. nd discrete	Primary Transmitters: Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
	1	1				1	<u> </u>	

FORM SA1-2. PAGE 5.

	LEGAL NAME OF OWNER OF								SYSTEM ID#	
Name	Atlantic Broadband (Se								040117	
	SUBSTITUTE CARRIAGE	: SPECIA		NT AND PROGRAM LO	G					
Substitute	In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions.									
Carriage:	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE									
Special	During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program									
Statement and Program Log	broadcast by a distant station? Yes XNo Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program									
	og in block 2. 2. LOG OF SUBSTITUTE PROGRAMS									
	n General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast 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). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976. WHEN SUBSTITUTE CARRIAGE									
									7. REASON	
	SUBSTITUTE PROGRAM 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S				5. MONTH 6. TIMES				FOR DELETION	
		Yes or No	CALL SIGN	4. STATION'S LOCATION	А	ND DAY	FROM	— то		
								_		
					-					
					-					
					-					
					-					
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					-					

FORM SA1-2. PAGE 6.	-
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID	Nama
Atlantic Broadband (SC) LLC 040117	,
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. 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.	K Gross Receipts
 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 \$263,800 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 for more information 	L Copyright Royalty Fee
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 this six-month accounting period is \$52.00 Line 1. Royalty fee for accounting period	
Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	
Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	-
	_
1. Base amount under statutory formula \$ 263,800.00	
2. Enter amount of gross receipts from space K \$ 148,483.00	
3. Subtract line 2 from line 1	
4. Enter the amount of gross receipts from space K \$ 148,483.00	
5. Enter the amount from line 3	
6. Subtract line 5 from line 4	
7. Multiply line 6 by .005 (enter figure here)	
8. Interest charge. Enter the amount from line 4, space Q, page 8	
9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)	_
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 recepits (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	
IMPORTANT : Your remittance must be in the form of an <i>electronic payment</i> payable to <i>Register of Copyrights</i> . See page I of the general instructions for more information.	-

ACCOUNTING PER		FORM SA1-2. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Atlantic Broadband (SC) LLC	SYSTEM ID: 04011
	CHANNELS	
Μ	Instructions: You must give (1) the number of channels on which the cable system carried t	elevision broadcast stations
Channels	to its subscribers and (2) the cable system's total number of activated channels, during the a	ccounting period.
Gliaillieis	1. Enter the total number of channels on which the cable	
	system carried television broadcast stations	9
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations	
	and nonbroadcast services	277
		ndividual to whom
Ν	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED. (Identify an in we can write or call about this statement of account.)	ndividual to whom
Individual to		
Be Contacted	Name Patrick Bratton	Telephone 617 796 9900
for Further Information	Name Patrick Bratton	Telephone 617-786-8800
	Address 2 Batterymarch Park, Suite 205	
	(Number, street, rural route, apartment, or suite number)	
	Quincy, MA 02169	
	(City, town, state, zip)	
	Email (optional) pbratton@atlanticbb.com Fax (c	ptional)
	CERTIFICATION (This statement of account must be certifed and signed in accordance with 0	Copyright Offce regulations,
0	as explained in the general instructions.)	
Certifcation	• 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 ider	ntifed 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 as identified
	in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the leg in line 1 of space B.	al entity identifed as owner of the cable system
	I have examined the statement of account and hereby declare under penalty of law that all stat	tements of fact contained herein
	are true, complete, and correct to the best of my knowledge, information, and belief, and are ma [18 U.S.C., Section 1001(1986)]	ade in good faith.
	Electronic signature: /s/ Patri	ck Bratton
	Typed or printed name: Patrick Bratton	
	Title: Chief Financial Officer (Title of official position held in corporation or partnership)	
	Date: 8/29/2017	

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 effects 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.

FORM SA1-2. PAGE 8	FORM	SA1-2.	PAGE	8.
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LEGAL NAME OF OWNER OF CABLE SYSTEM: S	YSTEM ID#	Nama
Atlantic Broadband (SC) LLC	040117	Name
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 beservice of providing secondary transmissions of primary broadcast transmitters, the system shall not incluse scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section. For more information on when to exclude these amounts, see the note on page (vii) of the general instructions. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmismade by satellite carriers to satellite dish owners? NO	asic ude sub- 119."	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underp For an explanation of interest assessment, see page (viii) of the general instructions.	ayment.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- 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** enter here and on line 3, block 4, space L, (page 7)	- rge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	e please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are fling this worksheet covering a statement of account already submitted to the Copyright Offce, list below the owner, address, first community served, ID number, and accounting period as given in the original		
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 Offce to collect the personally identifying inform	mation (PII) reques	ted on th

Privacy Act Notice: Section 111 of the 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 effects 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: 2017-1

FORM SA1-2. FILING FEE ADDENDUM

	AME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	
Atlant	ic Broadband (SC), LLC		40117	Name
С	ITY OR TOWN	STATE		First
	amberg	SC		Community
	<u> </u>			
Lir	e 1. ROYALTY FEE FROM SPACE L		¢ 405.00	
			\$ 165.83	Total
Lir	e 2. FILING FEE		20.00	Fee
	If Line 1 is from Space L, Block 1, enter \$15.00			
	If Line 1 is from Space L, Block 2 or Block 3, enter \$20.00			
Lir	e 3. TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCO Add lines 1 and 2 and enter here	UNTING PERIOD	185.83	
	העע ווווכט ו מווע צ מווע פוונפו וופופ	φ	100.00	
F	ffective January 1, 2014, pursuant to the Satellite Television Extensio	on and Localism Act of 2010) (STELA), which granted	
	uthority to the Copyright Office to establish fees for the filing of states			
1	22 statutory licenses, the Office now assesses filing fees for ALL SO	As for current, past and futu	ire accounting periods. For	
	etails, see the Federal Register, November 29, 2013 (78 FR 71498).			
	ne royalty payment is credited; thus the omission of the appropriate fil lease remit the royalty fee and filing fee in one EFT payment . (SOA1 filing			
1	in the royally fee and fung fee in the LFT payment . (SOAT fung	jee. φ15, 50112 juing jee. φ20	· · ·	