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 COPYRIGH  | IT OFFICE USE ONLY   | Return completed workbool<br>by email to:                                                                        |
|--------------------------------------------------------------------|---------------|----------------------|------------------------------------------------------------------------------------------------------------------|
| for Secondary Transmissions by<br>Cable Systems (Short Form)       | DATE RECEIVED | AMOUNT               | <u>coplicsoa@loc.gov</u>                                                                                         |
| General instructions are located in the first tab of this workbook | 03/01/2018    | \$ ALLOCATION NUMBER | For additional information,<br>contact the U.S. Copyright<br>Office Licensing Division at<br>Tel: (202) 707-8150 |

| A                    | ACCO | DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))                                                                                                                                                                                 |       |
|----------------------|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|
|                      |      |                                                                                                                                                                                                                                           |       |
|                      |      | 2017/2         Period 1 = January 1 - June 30         Period 2 = July 1 - December 31                                                                                                                                                     |       |
|                      |      |                                                                                                                                                                                                                                           |       |
|                      |      | Barcode Data Filing Period (optional - see instructions)                                                                                                                                                                                  |       |
| Accounting<br>Period |      |                                                                                                                                                                                                                                           |       |
| В                    |      | Instructions:<br>Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title<br>of the subsidiary, not that of the parent corporation.                  |       |
| Owner                |      | List any other name or names under which the owner conducts the business of the cable system.                                                                                                                                             |       |
|                      |      | If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.           |       |
|                      |      | Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.                                                                                                                 | 23645 |
|                      |      | LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM                                                                                                                                                                                       |       |
|                      |      |                                                                                                                                                                                                                                           |       |
|                      |      | ULTRA COMMUNICATIONS GROUP, LLC<br>BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)                                                                                                                                               |       |
|                      |      |                                                                                                                                                                                                                                           |       |
|                      |      | MAILING ADDRESS OF OWNER OF CABLE SYSTEM                                                                                                                                                                                                  |       |
|                      |      | ONE MONTGOMERY PLAZA, 4TH FLOOR<br>(Number, street, rural route, apartment, or suite number)                                                                                                                                              |       |
|                      |      | SIKESTON, MO 63801<br>(City, town, state, zip)                                                                                                                                                                                            |       |
| С                    |      | RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system<br>s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in |       |
| System               | 1    | IDENTIFICATION OF CABLE SYSTEM:                                                                                                                                                                                                           |       |
|                      | · ·  | ULTRA COMMUNICATIONS GROUP, LLC D/B/A NEWWAVE COMMUNICATIONS                                                                                                                                                                              |       |
|                      |      | MAILING ADDRESS OF CABLE SYSTEM:<br>210 E. EARLL DRIVE                                                                                                                                                                                    |       |
|                      | 2    | (Number, street, rural route, apartment, or suite number)                                                                                                                                                                                 |       |
|                      |      | PHOENIX, AZ 85012<br>(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 fing, a determination that would be made by a court of law.

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| Name                  | LEGAL NAME OF OWNER OF CABLE SYSTEM:                                                                                                                                                                                                                                                                                               | SYSTEM ID#                                                                                                                                      |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Name                  | ULTRA COMMUNICATIONS GROUP, LLC                                                                                                                                                                                                                                                                                                    | 23645                                                                                                                                           |
| D                     | Instructions: List each separate community served by the cable system. A "co<br>"a separate and distinct community or municipal entity (including unincorpor-<br>discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community tha<br>as the "first community." Please use it as the first community on all future fili | ated communities within unincorporated areas and including single,<br>at you list will serve as a form of system identification hereafter known |
| Area<br>Served        | Note: Entities and properties such as hotels, apartments, condominiums, or n identified city.                                                                                                                                                                                                                                      |                                                                                                                                                 |
|                       | CITY OR TOWN                                                                                                                                                                                                                                                                                                                       | STATE                                                                                                                                           |
| First                 | WISNER                                                                                                                                                                                                                                                                                                                             | LA STATE                                                                                                                                        |
| Community             | GILBERT                                                                                                                                                                                                                                                                                                                            | LA                                                                                                                                              |
|                       |                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                 |
| Add Rows as Necessary |                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                 |
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|                       |                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                 |

|                       | LEGAL NAME OF OWNER OF CA                                               | BLE SYSTEM:         |       |                  |            |                  |              |                | STEM ID |
|-----------------------|-------------------------------------------------------------------------|---------------------|-------|------------------|------------|------------------|--------------|----------------|---------|
| Name                  |                                                                         |                     | . LLC |                  |            |                  |              |                | 2364    |
|                       |                                                                         |                     | ,     |                  |            |                  |              |                |         |
| Е                     | SECONDARY TRANSMISSION                                                  |                     |       | -                | -          | , transmission a | onvice of th | o cablo        |         |
| -                     | In General: The information in s<br>system, that is, the retransmission |                     |       |                  |            |                  |              |                |         |
| Secondary             | about other services (including p                                       |                     |       |                  |            |                  |              |                |         |
| Transmission          | last day of the accounting period                                       |                     |       |                  |            |                  |              | 0              |         |
| Service: Sub-         | Number of Subscribers: Both                                             |                     |       |                  |            |                  |              |                |         |
| scribers and<br>Rates | down by categories of secondary<br>each category by counting the nu     |                     |       |                  |            |                  |              |                |         |
| Rates                 | separately for the particular servi                                     |                     |       |                  |            |                  |              | charged        |         |
|                       | Rate: Give the standard rate c                                          |                     |       |                  |            |                  |              | e and the      |         |
|                       | unit in which it is generally billed.                                   |                     |       |                  | ny standai | d rate variation | s within a p | articular rate |         |
|                       | category, but do not include disc                                       |                     |       |                  |            |                  |              | that askis     |         |
|                       | Block 1: In the left-hand block<br>systems most commonly provide        |                     |       |                  |            |                  |              |                |         |
|                       | that applies to your system. <b>Note</b>                                |                     |       |                  |            |                  |              |                |         |
|                       | categories, that person or entity                                       |                     |       |                  |            |                  |              |                |         |
|                       | subscriber who pays extra for ca                                        |                     |       |                  |            | in the count un  | der "Servic  | e to the       |         |
|                       | first set" and would be counted o                                       |                     |       |                  |            | convice that are | different fr | am thank       |         |
|                       | Block 2: If your cable system I<br>printed in block 1 (for example, ti  |                     |       |                  |            |                  |              |                |         |
|                       | with the number of subscribers a                                        |                     |       |                  |            |                  |              |                |         |
|                       | sufficient.                                                             | · · · · · · · · · · | 0     |                  |            |                  |              |                |         |
|                       | BLC                                                                     | DCK 1<br>NO. OF     |       |                  |            |                  | BLOCK        | 2<br>NO. OF    | - [     |
|                       | CATEGORY OF SERVICE                                                     | SUBSCRIBE           |       | RATE             | CATI       | EGORY OF SEI     | RVICE        | SUBSCRIBERS    | RATE    |
|                       | Residential:                                                            |                     |       |                  |            |                  |              |                |         |
|                       | <ul> <li>Service to first set</li> </ul>                                |                     | 49    | \$71.30          |            |                  |              |                |         |
|                       | <ul> <li>Service to additional set(s)</li> </ul>                        |                     |       |                  |            |                  |              |                |         |
|                       | <ul> <li>FM radio (if separate rate)</li> </ul>                         |                     |       |                  |            |                  |              |                |         |
|                       | Motel, hotel                                                            |                     |       |                  |            |                  |              |                |         |
|                       | Commercial                                                              |                     | 2     | \$71.30          |            |                  |              |                |         |
|                       | Converter                                                               |                     |       |                  |            |                  |              |                |         |
|                       | Residential                                                             |                     |       |                  |            |                  |              |                |         |
|                       | Non-residential                                                         |                     |       |                  |            |                  |              |                |         |
|                       | SERVICES OTHER THAN SEC                                                 | ONDARY TRA          | NSMIS |                  | s          |                  |              |                | •       |
| Е                     | In General: Space F calls for rat                                       |                     |       |                  |            | l your cable sys | tem's servi  | ces that were  |         |
| F                     | not covered in space E, that is, the                                    |                     |       |                  |            |                  |              |                |         |
| Services              | service for a single fee. There ar furnished at cost or (2) services (  | •                   |       |                  | •          |                  | • • •        |                |         |
| Other Than            | amount of the charge and the un                                         |                     |       |                  |            |                  |              |                |         |
| Secondary             | enter only the letters "PP" in the                                      | rate column.        | -     | -                |            | -                |              | .g ,           |         |
| Fransmissions:        | Block 1: Give the standard rat                                          |                     |       |                  |            |                  |              |                |         |
| Rates                 | Block 2: List any services that<br>listed in block 1 and for which a s  |                     |       |                  |            |                  |              |                |         |
|                       | brief (two- or three-word) descrip                                      | •                   |       |                  | SHEU. LISI |                  |              | IOTTI OF A     |         |
|                       |                                                                         | BLO                 |       |                  |            |                  |              | BLOCK 2        |         |
|                       | CATEGORY OF SERVICE                                                     |                     |       | ORY OF SER       | VICE       | RATE             | CATEGO       | DRY OF SERVICE | RATE    |
|                       | Continuing Services:                                                    |                     |       | ation: Non-res   |            |                  |              |                |         |
|                       | • Pay cable                                                             | \$9-\$18.00         | • Mot | tel, hotel       |            |                  |              |                |         |
|                       | Pay cable—add'l channel                                                 |                     | • Cor | nmercial         |            |                  |              |                |         |
|                       | Fire protection                                                         |                     | • Pay | / cable          |            |                  |              |                |         |
|                       | •Burglar protection                                                     |                     |       | / cable-add'l ch | nannel     |                  |              |                |         |
|                       | Installation: Residential                                               |                     |       | protection       |            |                  |              |                |         |
|                       | First set                                                               | 40.00               |       | glar protection  |            |                  |              |                |         |
|                       | <ul> <li>Additional set(s)</li> </ul>                                   |                     |       | services:        |            |                  |              |                |         |
|                       | • FM radio (if separate rate)                                           |                     |       | connect          |            | \$25.00          |              |                |         |
|                       | Converter                                                               |                     |       | connect          |            |                  |              |                |         |
|                       |                                                                         |                     |       | tlet relocation  |            |                  |              |                |         |
|                       | 1                                                                       |                     | Jui   |                  |            |                  |              |                |         |
|                       |                                                                         |                     | • Mov | ve to new addr   | ess        | \$25.00          |              |                |         |

|                                    | LEGAL NAME OF OWNER OF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | - CABLE SYSTEM:                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | SYSTEM                                                                                                                                                                                                                                                                 |
|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ame                                | ULTRA COMMUNICA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | TIONS GROUP, LLC                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 23                                                                                                                                                                                                                                                                     |
|                                    | PRIMARY TRANSMITTERS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | •                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                        |
| G<br>imary<br>smitters:<br>evision | carried by your cable syste<br>FCC rules and regulations<br>76.59(d)(2) and (4), 76.61(<br>substitute program basis, a<br><b>Substitute Basis Stations</b><br>basis under specific FCC ru<br>• Do <i>not</i> list the station her<br>station was carried <i>only</i> on<br>• List the station here, and<br>basis. For further information<br><b>Column 1:</b> List each station<br>multicast stream associated<br>"WETA-2" as the same on<br><b>Column 2:</b> Give the chann<br>of license. For example, W<br><b>Column 3:</b> Indicate in each<br>educational station, by ente<br>(for independent multicast)<br>For the meaning of these to<br><b>Column 4:</b> Give the location | also in space I, if the station was carried<br>on concerning substitute basis stations,<br>n's call sign. <i>Do not</i> report origination p<br>d with a station according to its over-the | (1) stations carried only on a part-ti-<br>ne carriage of certain network progra<br>1(e)(2) and (4))]; and (2) certain stat<br>arried by your cable system on a sub-<br>ne Special Statement and Program L<br>d both on a substitute basis and also<br>see page (v) of the general instruction<br>orgram services such as HBO, ESP<br>e-air designation. For example, repo-<br>vision station for broadcasting over t<br>station, an independent station, or a<br>for network multicast), "I" (for indepen-<br>or "E-M" (for noncommercial education<br>ictions in the paper SA1-2 form.<br>the community to which the station i | me basis under<br>ims [sections<br>ions carried on a<br>ostitute program<br>.og)—if the<br>o on some other<br>ons.<br>N, etc. Identify each<br>rt multistream<br>the air in its community<br>noncommercial<br>endent), "I-M"<br>onal multicast).<br>is licensed by the |
|                                    | 1. CALL SIGN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 2. B'CAST CHANNEL NUMBER                                                                                                                                                                   | 3. TYPE OF STATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 4. LOCATION OF STATION                                                                                                                                                                                                                                                 |
|                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                        |
|                                    | KARD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 19                                                                                                                                                                                         | Ν                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | WEST MONROE, LA                                                                                                                                                                                                                                                        |
|                                    | KARD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u>19</u>                                                                                                                                                                                  | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | WEST MONROE, LA                                                                                                                                                                                                                                                        |
|                                    | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| s Necessary                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                        |
| ıs Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
| as Necessary                       | KLTM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13                                                                                                                                                                                         | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |
|                                    | KNOE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8                                                                                                                                                                                          | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MONROE, LA                                                                                                                                                                                                                                                             |

| Accounting P                                                                                                | Period: 2017                                                                                     | /2                                                           |                                                                                                                                                                                                                |                                                              |                                                     |                                     | FORM                                                   | A SA1-2E. PAGE 4                  |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------------------|-------------------------------------|--------------------------------------------------------|-----------------------------------|
| LEGAL NAME OF                                                                                               |                                                                                                  |                                                              |                                                                                                                                                                                                                |                                                              |                                                     |                                     |                                                        | SYSTEM ID#                        |
| ULTRA CON                                                                                                   | IMUNICATI                                                                                        | ONS G                                                        | ROUP, LLC                                                                                                                                                                                                      |                                                              |                                                     |                                     |                                                        | 2364                              |
|                                                                                                             | t every radio s                                                                                  | station ca                                                   | arried on a separate and discr<br>nerally receivable by your cat                                                                                                                                               |                                                              |                                                     |                                     |                                                        | н                                 |
| receivable if (1)<br>on the basis of<br>For detailed info<br>paper SA1-2 for<br>Column 1: lo<br>Column 2: S | it is carried by<br>monitoring, to<br>prmation about<br>rm.<br>dentify the call<br>state whether | y the sys<br>be receint<br>the Co<br>sign of e<br>the static | I-Band FM Carriage: Under of<br>stem whenever it is received a<br>wed at the headend, with the<br>opyright Office regulations on<br>each station carried.<br>on is AM or FM.<br>nal was electronically process | it the system's he<br>system's FM ante<br>this point, see pa | eadend, and (2<br>enna, during c<br>ge (v) of the g | 2) it can<br>ertain st<br>leneral i | be expected,<br>ated intervals.<br>nstructions in the. | Primary<br>Transmitters:<br>Radio |
| signal, indicate<br>Column 4: G                                                                             | this by placing<br>live the station                                                              | g a checl<br>n's locati                                      | k mark in the "S/D" column.<br>on (the community to which the<br>the community with which the                                                                                                                  | ne station is licen                                          | sed by the FC                                       |                                     |                                                        |                                   |
|                                                                                                             |                                                                                                  |                                                              |                                                                                                                                                                                                                |                                                              |                                                     |                                     |                                                        |                                   |
| CALL SIGN                                                                                                   | AM or FM                                                                                         | S/D                                                          | LOCATION OF STATION                                                                                                                                                                                            | CALL SIGN                                                    | AM or FM                                            | S/D                                 | LOCATION OF STATION                                    |                                   |
|                                                                                                             |                                                                                                  |                                                              |                                                                                                                                                                                                                |                                                              |                                                     |                                     |                                                        |                                   |
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| Accounting Perio         | od: 2017/2                                                                                                                                                                                      |                                                                                                                                       |                                                                                                                                                          |                                                                                                                                                                                                                                               |                                                                                                           | FOF                                                                                                                                  | RM SA1-2E. PAGE 5. |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------|
|                          | LEGAL NAME OF OWNER OF                                                                                                                                                                          |                                                                                                                                       |                                                                                                                                                          |                                                                                                                                                                                                                                               |                                                                                                           |                                                                                                                                      | SYSTEM ID#         |
| Name                     | ULTRA COMMUNICAT                                                                                                                                                                                | IONS GR                                                                                                                               | OUP, LLC                                                                                                                                                 |                                                                                                                                                                                                                                               |                                                                                                           |                                                                                                                                      | 23645              |
|                          | SUBSTITUTE CARRIAGE                                                                                                                                                                             |                                                                                                                                       |                                                                                                                                                          |                                                                                                                                                                                                                                               | 6                                                                                                         |                                                                                                                                      |                    |
| I                        | In General: In space I, identi<br>substitute basis during the a                                                                                                                                 | fy every noi                                                                                                                          | nnetwork televis                                                                                                                                         | sion program, broadcast by                                                                                                                                                                                                                    | a distant stati                                                                                           |                                                                                                                                      |                    |
| Substitute               | explanation of the programm                                                                                                                                                                     | ing that mus                                                                                                                          | t be included in                                                                                                                                         | this log, see page (v) of the                                                                                                                                                                                                                 | e general instr                                                                                           | uctions in the paper SA1                                                                                                             | I-2 form.          |
| Carriage:                | 1. SPECIAL STATEMENT                                                                                                                                                                            |                                                                                                                                       | NING SUBS                                                                                                                                                | TITUTE CARRIAGE                                                                                                                                                                                                                               |                                                                                                           |                                                                                                                                      |                    |
| Special<br>Statement and | <ul> <li>During the accounting period</li> </ul>                                                                                                                                                | od, did you                                                                                                                           | r cable system                                                                                                                                           | carry, on a substitute basi                                                                                                                                                                                                                   | s, any nonne                                                                                              | twork television prograr                                                                                                             | n                  |
| Program Log              | broadcast by a distant stat                                                                                                                                                                     | tion?                                                                                                                                 |                                                                                                                                                          |                                                                                                                                                                                                                                               |                                                                                                           | YES                                                                                                                                  | NO                 |
|                          | Note: If your answer is "No'                                                                                                                                                                    | , leave the                                                                                                                           | rest of this pag                                                                                                                                         | e blank. If your answer is '                                                                                                                                                                                                                  | 'Yes," you mu                                                                                             | ist complete the progra                                                                                                              | m                  |
|                          | log in block 2.                                                                                                                                                                                 |                                                                                                                                       |                                                                                                                                                          |                                                                                                                                                                                                                                               |                                                                                                           |                                                                                                                                      |                    |
|                          | 2. LOG OF SUBSTITUTE                                                                                                                                                                            |                                                                                                                                       |                                                                                                                                                          |                                                                                                                                                                                                                                               |                                                                                                           |                                                                                                                                      |                    |
|                          | period, was broadcast by a<br>under certain FCC rules, re-<br>Do not use general categori<br>"NBA Basketball: 76ers vs.<br><b>Column 2:</b> If the program<br><b>Column 3</b> : Give the call s | ce, please a<br>of every no<br>distant stat<br>gulations, o<br>es like "mo<br>Bulls."<br>n was broad<br>sign of the s<br>dcast statio | add additional i<br>nnetwork telev<br>ion and that yo<br>r authorization:<br>vies" or "baske<br>dcast live, ente<br>station broadca<br>on's location (th | rows to the tables.<br>ision program ("substitute  <br>ur cable system substitute<br>s. See page (v) of the gene<br>tball." List specific program<br>r "Yes." Otherwise enter "N<br>isting the substitute progra<br>ne community to which the | brogram") tha<br>d for the prog<br>eral instruction<br>n titles, for exa<br>lo."<br>m.<br>station is lice | t, during the accounting<br>ramming of another sta<br>ns for further informatio<br>ample, "I Love Lucy" or<br>nsed by the FCC or, in | g<br>ntion<br>n.   |
|                          |                                                                                                                                                                                                 |                                                                                                                                       |                                                                                                                                                          | tem carried the substitute                                                                                                                                                                                                                    |                                                                                                           |                                                                                                                                      | nth                |
|                          | first. Example: for May 7 giv                                                                                                                                                                   | e "5/7."                                                                                                                              | , ,                                                                                                                                                      | ·                                                                                                                                                                                                                                             | 0                                                                                                         |                                                                                                                                      |                    |
|                          | Column 6: State the time<br>to the nearest five minutes.                                                                                                                                        |                                                                                                                                       |                                                                                                                                                          | gram was carried by your o                                                                                                                                                                                                                    |                                                                                                           |                                                                                                                                      | ely                |
|                          | stated as "6:00–6:30 p.m."                                                                                                                                                                      |                                                                                                                                       | i program cam                                                                                                                                            |                                                                                                                                                                                                                                               | 15 p.m. to 0.2                                                                                            |                                                                                                                                      |                    |
|                          |                                                                                                                                                                                                 |                                                                                                                                       |                                                                                                                                                          | was substituted for progra                                                                                                                                                                                                                    |                                                                                                           |                                                                                                                                      |                    |
|                          | to delete under FCC rules a<br>was substituted for program                                                                                                                                      |                                                                                                                                       |                                                                                                                                                          |                                                                                                                                                                                                                                               |                                                                                                           |                                                                                                                                      | ram                |
|                          | effect on October 19, 1976.                                                                                                                                                                     | 0 ,                                                                                                                                   |                                                                                                                                                          |                                                                                                                                                                                                                                               |                                                                                                           | 0                                                                                                                                    |                    |
|                          | s                                                                                                                                                                                               | UBSTITUT                                                                                                                              | E PROGRAM                                                                                                                                                | 1                                                                                                                                                                                                                                             |                                                                                                           | N SUBSTITUTE                                                                                                                         | 7. REASON FOR      |
|                          | 1. TITLE OF PROGRAM                                                                                                                                                                             | 2. LIVE?<br>Yes or No                                                                                                                 | 3. STATION'S<br>CALL SIGN                                                                                                                                | 4. STATION'S LOCATION                                                                                                                                                                                                                         | 5. MONTH<br>AND DAY                                                                                       | 6. TIMES<br>FROM — TO                                                                                                                | DELETION           |
|                          |                                                                                                                                                                                                 |                                                                                                                                       |                                                                                                                                                          |                                                                                                                                                                                                                                               |                                                                                                           | _                                                                                                                                    |                    |
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| Accounting Period:            | 2017/2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | FORM SA                         | 1-2E. PAGE 6.        |
|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------------------|
| Name                          | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>ULTRA COMMUNICATIONS GROUP, LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | S                               | STEM ID#<br>23645    |
| K<br>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.         IMPORTANT: You must complete a statement in space P concerning gross receipts. | mission servic<br>s amount, see | e<br><b>),596.39</b> |
| L<br>Copyright<br>Royalty Fee | COPYRIGHT ROYALTY FEE<br>Instructions: To compute the royalty fee you owe:<br>• Complete block 1, block 2, or block 3.<br>• Use block 1 if the amount of gross receipts in space K is \$137,100 or less<br>• Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to<br>• Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600<br>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-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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>\$</b>                       | 52.00                |
|                               | BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 100)                            |                      |
|                               | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 7,600)                          |                      |
|                               | 1. 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 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                | 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 52.00                           |                      |
| Total Remittance<br>Due       | 2. Filing Fee (See the instructions for more information on filing fee calculations)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 15.00                           |                      |
|                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ¢                               | 67.00                |
|                               | 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<br>See page i of the general instructions in the paper SA1-2 form for more informat                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 | hts!                 |

| Accounting Period:                 | 2017/2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | FORM SA1-2E. PAGE 7    |
|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Name                               | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>ULTRA COMMUNICATIONS GROUP, LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | SYSTEM ID#<br>23645    |
| M<br>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 .         2. Enter the total number of activated channels                                                                                                                                                      | 4                      |
|                                    | on which the cable system carried television broadcast stations and nonbroadcast services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 31                     |
| N<br>Individual to<br>Be Contacted | <b>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> (Identify an individual to whom we can contact about this statement of account.)                                                                                                                                                                                                                                                                                                                                                                                                                                  |                        |
| for Further<br>Information         | Name EMERSON YEARWOOD Telephone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 602-364-6195           |
|                                    | Address 210 E. EARLL DRIVE<br>(Number, street, rural route, apartment, or suite number)<br>PHOENIX, AZ 85012<br>(City, town, state, zip)                                                                                                                                                                                                                                                                                                                                                                                                                                             |                        |
|                                    | Email EMERSON.YEARWOOD@CABLEONE.BIZ Fax (optional) 602-364-601                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 3                      |
| O<br>Certification                 | <ul> <li>CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)</li> <li>I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> <li>(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B</li> <li>(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy in line 1 of space B and that the owner is not a corporation or partnership; or</li> </ul> |                        |
|                                    | <ul> <li>X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as own in line 1 of space B.</li> <li>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.</li> <li>[18 U.S.C., Section 1001(1986)]</li> </ul>                                                                                                          | er of the cable system |
|                                    | X       /s/ RAYMOND STORCK         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: RAYMOND STORCK                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |
|                                    | Title: VICE PRESIDENT<br>(Title of official position held in corporation or partnership)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                        |
|                                    | Date: FEBRUARY 28, 2018                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        |

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 telephol 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 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 t 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 lav

| ounting Period: 2017/2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                          | FORM SA1-2E. PAG                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| AL NAME OF OWNER OF CABLE SYSTEM:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                          | SYSTEM                                                         |
| TRA COMMUNICATIONS GROUP, LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                          | 236                                                            |
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSION<br>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the of<br>lowing sentence:<br>"In determining the total number of subscribers and the gross amounts paid to the<br>service of providing secondary transmissions of primary broadcast transmitters,<br>scribers and amounts collected from subscribers receiving secondary transmisses<br>For more information on when to exclude these amounts, see the note on page (vii) of<br>located in the paper SA1-2 form.<br>During the accounting period, did the cable system exclude any amounts of gross received<br>made by satellite carriers to satellite dish owners? | Copyright Act by adding the fol-<br>the cable system for the basic<br>, the system shall not include sub-<br>sions pursuant to section 119."<br>the general instructions | P<br>Special Statemen<br>Concerning Gross<br>Receipts Exclusio |
| X         NO           YES. Enter the total here and list the satellite carrier(s) below.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | .\$                                                                                                                                                                      | _                                                              |
| Name Name Mailing Address Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                          | -                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                          | n<br>                                                          |
| INTEREST ASSESSMENT<br>You must complete this worksheet for those royalty payments submitted as a result of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | a late navment or undernavment                                                                                                                                           |                                                                |
| For an explanation of interest assessment, see page (viii) of the general instructions lo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                          | Q                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ocated in the paper SA1-2 form.                                                                                                                                          | Q<br>Interest Assessme                                         |
| For an explanation of interest assessment, see page (viii) of the general instructions lo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | x                                                                                                                                                                        | Q<br>Interest Assessme                                         |
| For an explanation of interest assessment, see page (viii) of the general instructions lo<br>Line 1 Enter the amount of late payment or underpayment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | xdays                                                                                                                                                                    | Q<br>Interest Assessme                                         |
| For an explanation of interest assessment, see page (viii) of the general instructions lo Line 1 Enter the amount of late payment or underpayment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | xdays                                                                                                                                                                    | Q<br>Interest Assessme                                         |
| For an explanation of interest assessment, see page (viii) of the general instructions lo         Line 1       Enter the amount of late payment or underpayment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | xdays                                                                                                                                                                    | Q<br>Interest Assessme                                         |
| For an explanation of interest assessment, see page (viii) of the general instructions lo         Line 1       Enter the amount of late payment or underpayment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | x                                                                                                                                                                        | Q<br>Interest Assessme                                         |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions lo</li> <li>Line 1 Enter the amount of late payment or underpayment</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | x                                                                                                                                                                        | Q<br>Interest Assessme                                         |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions lo</li> <li>Line 1 Enter the amount of late payment or underpayment</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | x                                                                                                                                                                        | Q<br>Interest Assessme                                         |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions lo</li> <li>Line 1 Enter the amount of late payment or underpayment</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | x                                                                                                                                                                        | Q<br>Interest Assessme                                         |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions lo</li> <li>Line 1 Enter the amount of late payment or underpayment</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | x                                                                                                                                                                        | L Interest Assessme                                            |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions lo</li> <li>Line 1 Enter the amount of late payment or underpayment</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | x                                                                                                                                                                        | Q<br>Interest Assessme                                         |
| For an explanation of interest assessment, see page (viii) of the general instructions lo Line 1 Enter the amount of late payment or underpayment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | x                                                                                                                                                                        | Q<br>Interest Assessme                                         |

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