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	T OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@loc.gov</u> For additional information,
General instructions are located in the first tab of this workbook	08/23/2018	ALLOCATION NUMBER	contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACCC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
		20181 Barcode Data Filing Period (optional - see instructions)	
Accounting Period			
		Instructions:	
В		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 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.	
			14210
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		TDS Broadband Service LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		Baja Broadband	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		525 Junction Rd. (Number, street, rural route, apartment, or suite number)	
		Madison, WI 53717-2152	
		(City, town, state, zip)	
С		CUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system us 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:	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2		
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	
1			

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	TDS Broadband Service LLC	14210
D	Instructions: List each separate community served by the cable system. A "community a separate and distinct community or municipal entity (including unincorporate discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that y as the "first community." Please use it as the first community on all future filing	d communities within unincorporated areas and including single, ou list will serve as a form of system identification hereafter known s.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or molidentified city.	nie nome parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	SEMINOLE	TX
Community	DENVER CITY	ТХ
	SEAGRAVES	TX
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF C							FORM SA1	TEM ID
Name	TDS Broadband Service							010	1421
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmission about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondar each category by counting the n	pace E should on of television ay cable) in sp I (June 30 or De blocks in space y transmission space	cover a and rac ace F, ecembe ce E ca service	all categories of dio broadcasts not here. All the er 31, as the ca Il for the numbe . In general, yo	secondar by your sy e facts you se may be er of subsc u can com	stem to subscrit state must be t e). ribers to the cat pute the numbe	pers. Give hose existi ble system r of subscr	information ing on the , broken ibers in	
	separately for the particular serv Rate: Give the standard rate of unit in which it is generally billed category, but do not include disc Block 1: In the left-hand block systems most commonly provide that applies to your system. Note	ice at the rate i harged for eacl . (Example: "\$2 ounts allowed f in space E, the to their subscr	ndicate h categ 0/mth" for adva e form l ribers.	ed—not the num lory of service.). Summarize a ance payment. ists the categor Give the numbe	iber of set Include bo ny standar ies of sec er of subsc	s receiving serv th the amount o rd rate variations ondary transmis ribers and rate f	ice). f the charg s within a p sion servic for each lis	e and the particular rate we that cable ted category	
	categories, that person or entity subscriber who pays extra for ca first set" and would be counted or Block 2: If your cable system printed in block 1 (for example, t with the number of subscribers a sufficient.	should be cour ble service to a once again undo has rate catego iers of services	nted as addition er "Ser ories for that in	a subscriber in al sets would b vice to additionar r secondary trai clude one or mo	each appl e includec al set(s)." nsmission ore second	licable category. I in the count un service that are dary transmissio	Example: der "Servio different fr ons), list the	a residential ce to the rom those em, together	
	BL	DCK 1					BLOC		1
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE		RATE	CAT	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential: • Service to first set		912	34.72					
	Service to additional set(s)FM radio (if separate rate)								
	Motel, hotel		116	5.99-15.67					
	Commercial								
	Converter Residential		460	3.50-17.00					
	Non-residential		460	3.30-17.00					
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for rai not covered in space E, that is, t service for a single fee. There are furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip	e (not subscrib hose services t e two exception or facilities furm it in which it is rate column. e charged by th your cable sys separate charg	er) info hat are ns: you ished t usually ne cabl stem fui e was i	ermation with re e not offered in of do not need to o nonsubscribe billed. If any ra e system for ea rnished or offer made or establi	spect to al combinatic give rate rs. Rate ir tes are ch ch of the a ed during	on with any seco information condu- formation shoul arged on a varia applicable service the accounting p	ndary tran cerning (1) d include b able per-pr ces listed. ceriod that	smission services ooth the ogram basis, were not	
		BLOO					0.1750	BLOCK 2	
	CATEGORY OF SERVICE Continuing Services:			GORY OF SER ation: Non-res		RATE	CATEG	ORY OF SERVICE	RAT
	Pay cable	7.4-19.99		otel, hotel					
	• Pay cable—add'l channel		• Co	mmercial					
				y cable					
	Fire protection		• Pa	y cable-add'l ch	nannel				
	•Burglar protection								
	•Burglar protection Installation: Residential	20.05.20.00	• Fin	e protection					
	•Burglar protection Installation: Residential • First set	29.95-39.96	• Fin • Bu	e protection rglar protection					
	•Burglar protection Installation: Residential • First set • Additional set(s)		• Fir • Bu Other	e protection rglar protection services:		25 00			
	•Burglar protection Installation: Residential • First set		• Fin • Bu Other • Re	e protection rglar protection		25.00			

unting Period: 2	-			FORM SA1-2E. PA
Name	LEGAL NAME OF OWNER O			SYSTEM 142
	TDS Broadband Serv			177
G Primary ansmitters: Felevision	PRIMARY TRANSMITTERS: In General: In space G, idicarried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do <i>not</i> list the station here station was carried <i>only</i> or • List the station here, and basis. For further informatii Column 1: List each statio multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in each educational station, by entre (for independent multicast) For the meaning of these t Column 4: Give the location	TELEVISION entify every television station (including em during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th (e)(2) and (4), or 76.63 (referring to 76.6 as explained in the next paragraph. S: With respect to any distant stations ca- ules, regulations, or authorizations: re in space G—but do list it in space I (th n a substitute basis. also in space I, if the station was carried on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p id with a station according to its over-the	(1) stations carried only on a part the carriage of certain network prog 1(e)(2) and (4))]; and (2) certain st arried by your cable system on a su the Special Statement and Program d both on a substitute basis and all see page (v) of the general instruct rogram services such as HBO, ES -air designation. For example, rep vision station for broadcasting ove station, an independent station, or for network multicast), "I" (for indep r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the station	television stations) -time basis under rams [sections ations carried on a ubstitute program h Log)—if the so on some other ctions. SPN, etc. Identify each bort multistream r the air in its community a noncommercial pendent), "I-M" tional multicast). n is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	КАМС	28.1	N	Lubbock, TX
	KLBK	13.1	N	Lubbock, TX
	KOSA	7.1	N	Odessa, TX
	KJTV	34.1	N	Lubbock, TX
ows as Necessary	KJTV-CD	32.1	N-M	Lubbock, TX
	KCBD	11.1	Ν	Lubbock, TX
	KCBD-DT2	11.2	N-M	Lubbock, TX
	KWES	9.1	N	Odessa, TX
	KLCW	22.1	I	Lubbock, TX
	KUPT-DT2	22.2	I-M	Lubbock, TX
	KUPB	18.1	l	Midland, TX
	KUPB-DT2	18.2	I-M	Midland, TX
	ΚΧΤQ	46.1	I	Lubbock, TX
	кттг	5.1	E	Lubbock, TX
	KMLM	42.1	I	Odessa, TX
	KLBB-LP	48.1	I	Lubbock, TX
	KLBB-LP-DT3	48.3	I-M	Lubbock, TX
	1			

ounting Period	-			FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID
Mullio	TDS Broadband Servi	ice LLC		1421
	PRIMARY TRANSMITTERS:	TELEVISION		
G	carried by your cable system	ntify every television station (including t n during the accounting period, <i>except</i> n effect on June 24, 1981, permitting th	(1) stations carried only on a part-tin	ne basis under
Primary	5	(2) and (4) , or 76.63 (referring to 76.63)		•
ransmitters:	substitute program basis, as	s explained in the next paragraph.		
Television		: With respect to any distant stations ca	rried by your cable system on a subs	stitute program
		iles, regulations, or authorizations: e in space G—but do list it in space I (th	e Special Statement and Program I	oa)—if the
	station was carried only on			
		also in space I, if the station was carried		
		n concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p		
		I with a station according to its over-the	3	
	"WETA-2" as the same on th	he form.	0 171	
		el number the FCC assigned to the telev	vision station for broadcasting over th	ne air in its community
		RC is channel 4 in Washington, D.C. case whether the station is a network s	station an independent station or a r	noncommercial
	column 5. mulcale meach	case whether the station is a network s	•	
	educational station, by enter	ring the letter "N" (for network), "N-M" (f	for network multicast), "I" (for indeper	ndent), "I-M"
		ring the letter "N" (for network), "N-M" (for noncommercial educational), o		
	(for independent multicast), For the meaning of these te	"E" (for noncommercial educational), o rms, see page (iv) of the general instru-	r "E-M" (for noncommercial education ctions in the paper SA1-2 form.	nal multicast).
	(for independent multicast), For the meaning of these ter Column 4: Give the location	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is	nal multicast). s licensed by the
	(for independent multicast), For the meaning of these ter Column 4: Give the location	"E" (for noncommercial educational), o rms, see page (iv) of the general instru-	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is	nal multicast). s licensed by the
	(for independent multicast), For the meaning of these ter Column 4: Give the location	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is	nal multicast). s licensed by the
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is	nal multicast). s licensed by the
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
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	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
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	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.
	(for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of the stations.	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	nal multicast). s licensed by the s identified.

EGAL NAME OI			/STEM:					SYSTEM I 142
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cat					н
eceivable if (1) on the basis of for detailed info aper SA1-2 fo Column 1: lo Column 2: S Column 3: If ignal, indicate Column 4: C) it is carried b monitoring, to ormation abou rm. dentify the cal State whether f the radio stat this by placing Sive the station	y the sys be recein at the Co l sign of the the static tion's sig g a checl n's locati	I-Band FM Carriage: Under (stem whenever it is received a ived at the headend, with the opyright Office regulations on each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante this point, see pa sed by the cable s ne station is licent	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st eneral i eparate	be expected, rated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	e/D		CALL SIGN	AM or FM	e/n	LOCATION OF STATION	
		S/D	LOCATION OF STATION	CALL SIGN	AIVI OF FIM	S/D	LOCATION OF STATION	
(SEM	FM	x	Seminole, TX					
	+	+						
			·					

Accounting Perio	od: 2018/1						FOF	RM SA1-2E. PAGE 5.
News	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	TDS Broadband Servi	ce LLC						14210
	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G			
I	In General: In space I, ident substitute basis during the a	tify <i>every noi</i> accounting pe	nnetwork televis eriod, under spe	<i>ion program,</i> broadcast by cific present and former FC	v a <i>distant</i> stati CC rules, regul	ations, or au	thorizations	. For a further
Substitute	explanation of the programm				e general instr	uctions in th	e paper SA1	I-2 form.
Carriage: Special	1. SPECIAL STATEMEN							
Statement and	 During the accounting per 	riod, did you	ir cable system	carry, on a substitute bas	is, any nonnet	work televis	sion prograr	
Program Log	broadcast by a distant sta	ation?					YES	× NO
	Note: If your answer is "No	o", leave the	rest of this pag	e blank. If your answer is	"Yes," you mu	ist complete	e the progra	m
	log in block 2.							
	2. LOG OF SUBSTITUT	E PROGRA	AMS					
	In General: List each subs				wherever pos	sible, if thei	r meaning is	3
	clear. If you need more spa				program") the	t during the		~
	period, was broadcast by a			sion program ("substitute ur cable system substitute				
	under certain FCC rules, re	egulations, o	or authorization	s. See page (v) of the gen	eral instruction	ns for furthe	r informatio	n.
	Do not use general categor		vies" or "baske	tball." List specific program	n titles, for exa	ample, "I Lo	ve Lucy" or	
	"NBA Basketball: 76ers vs.		dooot livo, opto	"Yes." Otherwise enter "	No."			
				sting the substitute progra				
	Column 4: Give the broa	adcast static	on's location (th	e community to which the	station is lice		FCC or, in	
	the case of Mexican or Car							41-
	first. Example: for May 7 gi		when your sys	tem carried the substitute	program. Use	numerals,	with the mo	nth
			e substitute pro	gram was carried by your	cable system.	List the tim	es accurate	elv
	to the nearest five minutes.							, ,
	stated as "6:00–6:30 p.m."	د	Refer days and some of					- 1
						our system	was require	ed
	Column 7: Enter the lett							
	to delete under FCC rules a	and regulation	ons in effect du	ring the accounting period	; enter the let	ter "P" if the	listed prog	
		and regulation ming that y	ons in effect du	ring the accounting period	; enter the let	ter "P" if the	listed prog	
	to delete under FCC rules a was substituted for program	and regulation ming that y	ons in effect du	ring the accounting period	l; enter the let er FCC rules a	ter "P" if the nd regulatio	listed progrons in	
	to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y	ons in effect du	ring the accounting period s permitted to delete unde	l; enter the let er FCC rules a	ter "P" if the	ilisted programs in	7. REASON FOR
	to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y SUBSTITUT 2. LIVE?	ons in effect du /our system wa IE PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let FCC rules a WHE CARRI 5. MONTH	ter "P" if the nd regulatio N SUBSTI AGE OCC 6. T	TUTE URRED	ram
	to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y	ons in effect du /our system wa	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARRI	ter "P" if the nd regulation N SUBSTI AGE OCC 6. T	tisted programs in	7. REASON FOR
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Accounting Period:	2018/1			FORM S	GA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:			Ş	SYSTEM ID#
	TDS Broadband Service LLC				14210
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file all amounts (gross receipts) paid to your cable system by subscribers for the (as identified in space E) during the accounting period. For a further explana page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross	system's stion of how	secondary trans to compute this	mission servi s amount, see \$ 31	се
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,101 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 See page (vi) of the general instructions located in the paper SA1-2 form for more	0 but less t e informatio	han \$527,600 on.	\$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$13	7,100 OR	LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royal accounting period is \$52.00 Line 1. Royalty fee for accounting period	, ,			1
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add li	nes 1 and 2	2	· · <u></u>	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LE	SS (but m	ore than \$137,	100)	
	1. Base amount under statutory formula	\$	263,800.00		
	2. Enter amount of gross receipts from space K				
	3. Subtract line 2 from line 1				
	4. Enter the amount of gross receipts from space K				
	5. Enter the amount from line 3				
	6. Subtract line 5 from line 4				
	7. Multiply line 6 by .005 (enter figure here)				
	8. Interest charge. Enter the amount from line 4, space Q, page 8		· · · · · · · · · · · · · · · · · · ·		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines	7 and 8	· · · · · · · · · · · · · · · · · · ·		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$26	3,800 (but	less than \$527	(,600)	
	1. Enter the amount of gross receipts from space K	\$	311,543.17		
	2. Base amount under statutory formula		263,800.00		
	3. Subtract line 2 from line 1				
	4. Multiply line 3 by .01			477.43	
	 Royalty due on the first \$263,800 of gross receipts (under statutory formula). 				
	 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		-	\$	1,796.43
				Ŧ	.,
	FILING FEE AND TOTAL REMITTANCE DU	JE			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	1,796.43	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)		\$	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	1,816.43
	Important: Your remittance must be in the form of an electronic pay See page i of the general instructions in the paper SA1		-		ghts!

Accounting Period	: 2018/1		FORM SA1-2E. PAGE 7
Name		OF OWNER OF CABLE SYSTEM: Dand Service LLC	SYSTEM ID 14210
M Channels	 to its subscrib 1. Enter the to system carri 2. Enter the to on which the 	You must give (1) the number of channels on which the cable system carried television broadcast stations bers, and (2) the cable system's total number of activated channels during the accounting period. botal number of channels on which the cable ied television broadcast stations botal number of activated channels e cable system carried television broadcast stations	16 306
	and nonbroa		
N Individual to Be Contacted		TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom ct about this statement of account.)	
for Further Information	Name	Peggy Smykal Telephone (802)	485-9748
	Address	24 Depot Square, Unit 2 (Number, street, rural route, apartment, or suite number)	
		Northfield, VT 05663 (City, town, state, zip)	
	Email	finance@tdstelecom.com Fax (optional)	
	CERTIFICATIO	DN (This statement of account must be certified and signed in accordance with Copyright Office regulations)	
O Certification	• I, the undersig	gned, hereby certify that (Check one, but only one, of the boxes.)	
	(Ow	vner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or	
		nent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as in line 1 of space B and that the owner is not a corporation or partnership; or	sidentified
	X (Of	fficer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the	e cable system
	 I have examir are true, comp 	in line 1 of space B. ned the statement of account and hereby declare under penalty of law that all statements of fact contained herein olete, and correct to the best of my knowledge, information, and belief, and are made in good faith. sction 1001(1986)]	
		X /s/ Amanda K. Moore	
		Enter an electronic signature on the line above to certify this statement.	
		Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	
		Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	

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 telephon 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 law

unting Period: 2018/1	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
Broadband Service LLC	1421
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include service of providing secondary transmissions of primary broadcast transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmission made by satellite carriers to satellite dish owners? NO	ub- Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name Name Mailing Address Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form	
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For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form Line 1 Enter the amount of late payment or underpayment	
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