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	08/22/2018	ALLOCATION NUMBER	contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

A	ACCO	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2018/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
Accounting		20181 Barcode Data Filing Period (optional - see instructions)	
Period			
В		Instructions: 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.	
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	5014
		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		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system u s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in s	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	
L			

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.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	TDS Broadband Service LLC	5014
D	Instructions: List each separate community served by the cable system. A " "a separate and distinct community or municipal entity (including unincorp discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community t as the "first community." Please use it as the first community on all future Note: Entities and properties such as hotels, apartments, condominiums, or	community" is the same as a "community unit" as defined in FCC rules: orated communities within unincorporated areas and including single, hat you list will serve as a form of system identification hereafter known filings.
Area Served	identified city.	mobile nome parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	JAL	NM
Community		
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:								A1-2E. PAG
Name	TDS Broadband Service	LLC								50 ⁻
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 periodo Number of Subscribers: Both down by categories of secondar each category by counting the n separately for the particular serv Rate: Give the standard rate of unit in which it is generally billed	SERVICE: SU pace E should on of television ay cable) in space (June 30 or De blocks in space y transmission s umber of billing ice at the rate in harged for eact . (Example: "\$2	cover all and radi ace F, ne ecember ce E call service. s in that ndicated n catego 0/mth").	categories of o broadcasts l ot here. All the 31, as the ca- for the numbe in general, you category (the —not the num ry of service. I Summarize a	secondar, by your sy facts you se may be or of subsc u can com number o ber of set nclude bo	rstem to sub state must cribers to the pute the nu f persons o s receiving th the amou	be the be the cab mbe r orga servi	ers. Give nose existi le system of subscr anizations ce). the charg	information ng on the broken ibers in charged e and the	
	category, but do not include disc Block 1: In the left-hand block systems most commonly provide that applies to your system. Note categories, that person or entity subscriber who pays extra for ca first set" and would be counted of Block 2: If your cable system printed in block 1 (for example, t with the number of subscribers a sufficient.	in space E, the to their subscr Where an inc should be coun ble service to a once again und has rate catego iers of services and rates, in the	e form lis ibers. G lividual c ted as a additiona er "Servi ories for s that incl	ts the categor ive the number or organization subscriber in I sets would b ce to additiona secondary trar ude one or mo	er of subso a is receivi each appl e includec al set(s)." asmission ore second	ribers and i ng service t licable cate I in the cour service that dary transm	rate f hat f gory. ht und t are issio	or each lis alls under Example: der "Servic different fr ns), list the on of the s	ted category different a residential te to the om those em, together ervice is	
	BLO	DCK 1						BLOCH		
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE	RS	RATE	CAT	EGORY OF	SEF	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential: • Service to first set		37	61.50						
	 Service to additional set(s) 									
	 FM radio (if separate rate) 									
	Motel, hotel		5	14.25						
	Commercial									
	Converter									
	Residential		38	3.50						
	Non-residential									
F Services Other Than Secondary ransmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar 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) descript	e (not subscrib hose services t te two exception or facilities furn hit in which it is rate column. te charged by th your cable sys separate charge	er) inform hat are r ns: you c ished to usually t ne cable tem furm e was m	nation with re- not offered in co o not need to nonsubscribe silled. If any ra system for ea ished or offere ade or establis	spect to al combinatic give rate rs. Rate ir tes are ch ch of the a ed during	on with any information s narged on a applicable s the account	seco conc hould varia ervic ing p	ndary transerning (1) d include b ble per-pr es listed. eriod that	smission services both the ogram basis, were not	
		BLOO							BLOCK 2	
	CATEGORY OF SERVICE	RATE		ORY OF SER		RATE		CATEG	ORY OF SERVIC	E RAT
	Continuing Services:	44.4.40		ion: Non-res	idential					
	Pay cable Pay cable—add'l channel	11.4-19		el, hotel Imercial						
	Fire protection		• Con							
	Burglar protection			cable-add'l ch	annel					
	Installation: Residential			protection						
	• First set	29.95-39.96		lar protection						
	Additional set(s)			ervices:						
	• FM radio (if separate rate)			onnect		25.	00			
								L		
	• Converter		• Disc	onnect						
	, , ,			onnect et relocation		19.98-24.	95			

	LEGAL NAME OF OWNER OF	F CABLE SYSTEM:		SYSTEM
Name	TDS Broadband Serv	ice LLC		50
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary ransmitters: Television	carried 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 ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast) For the meaning of these to Column 4: Give the location	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 d with a station according to its over-the	t (1) stations carried only on a part-ti he carriage of certain network progra 51(e)(2) and (4))]; and (2) certain stat arried by your cable system on a sub he Special Statement and Program L d both on a substitute basis and also , see page (v) of the general instruction program services such as HBO, ESP e-air designation. For example, repo evision station for broadcasting over t station, an independent station, or a (for network multicast), "I" (for independent station, in the paper SA1-2 form. t the community to which the station in	me basis under ms [sections ions carried on a stitute program .og)—if the on some other ons. N, etc. Identify each rt multistream the air in its community noncommercial endent), "I-M" onal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	кмір	2.1	N	Midland, TX
	KOSA	7.1	N	Odessa, TX
	KPEJ	24.1	N	Odessa, TX
	KWES	9.1	N	Odessa, TX
Rows as Necessary	KWES-DT2	9.2	N-M	Odessa, TX
nows as necessary	КОРВ	18.1		Midland, TX
	KTLE-LP	20		Odessa, TX
	KENW	3	E	
				POILIES, INVI
		42		Portales, NM Odessa TX
	KMLM	42	Ī	Odessa, TX
		42		
		42	- I	
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counting Period:	[OVOTEMID
Name	LEGAL NAME OF OWNER OF			SYSTEM ID
	TDS Broadband Servi	ice LLC		501
	PRIMARY TRANSMITTERS:	TELEVISION		
^	In General: In space G, ide	entify every television station (including	translator stations and low power tele	vision stations)
G		m during the accounting period, except		
During a m /	J	n effect on June 24, 1981, permitting the $76, 62$ (referring to $76, 62$)	0 1 0	•
Primary Transmitters:		e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph.		ons carried on a
Television		: With respect to any distant stations ca	arried by your cable system on a subs	titute program
		iles, regulations, or authorizations:		N 15.0
	 Do not list the station here station was carried only on 	e in space G—but do list it in space I (th a substitute basis	he Special Statement and Program Lo	og)—if the
	,	also in space I, if the station was carried	both on a substitute basis and also	on some other
	basis. For further informatio	n concerning substitute basis stations,	see page (v) of the general instruction	ns.
		n's call sign. <i>Do not</i> report origination p	-	-
	"WETA-2" as the same on t	I with a station according to its over-the	eair designation. For example, report	multistream
		el number the FCC assigned to the tele	vision station for broadcasting over th	e air in its community
		RC is channel 4 in Washington, D.C.	-	
		case whether the station is a network	-	
	educational station, by ente	ring the letter "N" (for network), "N-M" (
	(for independent multicast)	"E" (for popportional advantional)		al multicant)
		"E" (for noncommercial educational), o		nal multicast).
	For the meaning of these te	erms, see page (iv) of the general instru	ctions in the paper SA1-2 form.	,
	For the meaning of these te Column 4: Give the location		ctions in the paper SA1-2 form. the community to which the station is	licensed by the
	For the meaning of these te Column 4: Give the location	erms, see page (iv) of the general instru n of each station. For U.S. stations, list	ctions in the paper SA1-2 form. the community to which the station is	licensed by the
	For the meaning of these te Column 4: Give the location	erms, see page (iv) of the general instru n of each station. For U.S. stations, list	ctions in the paper SA1-2 form. the community to which the station is	licensed by the
	For the meaning of these te Column 4: Give the location	erms, see page (iv) of the general instru n of each station. For U.S. stations, list	ctions in the paper SA1-2 form. the community to which the station is	licensed by the
	For the meaning of these te Column 4: Give the location FCC. For Mexican or Canad	erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	licensed by the sidentified.
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	For the meaning of these te Column 4: Give the location FCC. For Mexican or Canad	erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	licensed by the sidentified.
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	For the meaning of these te Column 4: Give the location FCC. For Mexican or Canad	erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	licensed by the sidentified.
	For the meaning of these te Column 4: Give the location FCC. For Mexican or Canad	erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	licensed by the sidentified.
	For the meaning of these te Column 4: Give the location FCC. For Mexican or Canad	erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	licensed by the sidentified.
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	For the meaning of these te Column 4: Give the location FCC. For Mexican or Canad	erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	licensed by the sidentified.
	For the meaning of these te Column 4: Give the location FCC. For Mexican or Canad	erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	licensed by the sidentified.
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	For the meaning of these te Column 4: Give the location FCC. For Mexican or Canad	erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	licensed by the sidentified.
	For the meaning of these te Column 4: Give the location FCC. For Mexican or Canad	erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	ctions in the paper SA1-2 form. the community to which the station is ne community with which the station is	licensed by the sidentified.

EGAL NAME OF			/STEM:					SYSTEM ID 501
	every radio s	station ca	arried on a separate and disc nerally receivable by your ca					н
eceivable if (1) on the basis of i cor detailed info paper SA1-2 for Column 1: Ic Column 2: S Column 3: If ignal, indicate Column 4: G	it is carried by monitoring, to prmation about m. lentify the call tate whether to the radio stat this by placing ive the station	y the sys be recein t the Co sign of the the static ion's sig g a chech n's locati	I-Band FM Carriage: Under the whenever it is received ved at the headend, with the opyright Office regulations or each station carried. on is AM or FM. nal was electronically proces k mark in the "S/D" column. on (the community to which the community with which the	at the system's he e system's FM ant this point, see pa esed by the cable the station is licer	eadend, and (enna, during c age (v) of the g system as a so used by the FC	2) it can ærtain si general i eparate	be expected, rated intervals. nstructions in the. and discrete	Primary Transmitters: Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
V/A								
				-				
					·			
] [

Name LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM TDS Broadband Service LLC 50 Substitute SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? YES NO Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substitute for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: Toers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Othenwise enter "No." Column 3: Give the program was broadcast iny one comunity with which th
I Substitute SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Image: Concern television program broadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. Image: Concern television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substitute for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program tiles, for example, "I Love Lucy" or "NBA Basketball: T6ers vs. Bulls." Column 3: Give the call sign of the station broadcast station is licensed by the FCC or, in the case of Mexican or Canadian station. See page (v) of the yongram. "Column 3: Give the condicast station's location (the community with which the station is identified). Column 1: Give the broadcast station's location (the community with which the station is identifi
In General: In space I, identify <i>every nonnetwork television program</i> , broadcast by a <i>distant</i> station, that your cable system carried on a <i>substitute basis</i> during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • Uuring the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system carried or the general instructions for there rest information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."
Substitute substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. Substitute 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE * During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? * Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substitute for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station is location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the
Carriage: 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE Statement and Program Log • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? West West Wast West Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."
 Special Statement and Program Log • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57."
Statement and Program Log Public the accounting period, duryout cable system carry, on a substitute basis, any nonnetwork television program products by a distant station? Image: Construct the program of the program. Column 1: Give the broadcast station is location (the community to which the station is identified). Column 3: Give the broadcast station of the program. Use numerals, with the month first. Example: for May 7 give "5/7."
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to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be
stated as "6:00–6:30 p.m."
Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was <i>required</i>
to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in
effect on October 19, 1976.
WHEN SUBSTITUTE
SUBSTITUTE PROGRAM CARRIAGE OCCURRED 7. REASON F
1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES DELETION Yes or No CALL SIGN 4. STATION'S LOCATION AND DAY FROM TO

Accounting Period:	2018/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	STEM ID#
	TDS Broadband Service LLC		5014
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a further explanation of how to compute this page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	mission service s amount, see	, 921.29
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	\$263,800	
	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	. \$	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	(,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 Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		hts!

Accounting Period:	2018/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: TDS Broadband Service LLC	SYSTEM ID# 5014
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations . 2. Enter the total number of activated channels on which the cable system carried television broadcast stations . on which the cable system carried television broadcast stations and nonbroadcast services .	9 151
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact 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)	
O Certification	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership; or X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith) Typed or printed name: Amanda K. Moore Title:	stem as identified
	Title: Assistant Treasurer (Title of official position held in corporation or partnership)	
	Date: 22 August 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 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 lave

unting Period: 2018/1		FORM SA1-2E. PAG
L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM
Broadband Service LLC		50
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXC The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A) lowing sentence: "In determining the total number of subscribers and the gross amounts service of providing secondary transmissions of primary broadcast trans scribers and amounts collected from subscribers receiving secondary tr For more information on when to exclude these amounts, see the note on page located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gro made by satellite carriers to satellite dish owners?	, of the Copyright Act by adding the fol- paid to the cable system for the basic smitters, the system shall not include sub- ransmissions pursuant to section 119." e (vii) of the general instructions	P Special Statemen Concerning Gross Receipts Exclusio
X NO		
YES. Enter the total here and list the satellite carrier(s) below.	\$	_
Name Name		
Mailing Address Mailing Addres	ess	
INTEREST ASSESSMENT		
You must complete this worksheet for those royalty payments submitted as a re- For an explanation of interest assessment, see page (viii) of the general instruct		Q
For an explanation of interest assessment, see page (viii) of the general instruct	ctions located in the paper SA1-2 form.	Q Interest Assessme
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