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.

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Short Form)

## **SA1-2E** Short Form

Return completed workbook by email to:

## coplicsoa@loc.gov

For additional information, contact the U.S. Copyright

General instru in the first tab				ALLOCATION NUMBER	Office Licensing Division at Tel: (202) 707-8150
Α	ACC	OUNTING PERIOD COVERE	D BY THIS STATEMENT: (Y	YYY/(Period))	
		2019/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
Accounting Period			Barcode Data Filing Period (optiona	II - see instructions)	
В		Instructions: Give the full legal name of the owner o of the subsidiary, not that of the paren		diary of another corporation, give the full corp	porate title
Owner		List any other name or names under whether whether the second s	hich the owner conducts the business of t	he cable system.	
		÷	he accounting period, only the owner on t y fee payment covering the entire account	the last day of the accounting period should su ting period.	
		Check here if this is the system's first fi	ling. If not, enter the system's ID number	assigned by the Licensing Division.	29666
		LEGAL NAME OF OWNER/MAIL	ING ADDRESS OF CABLE SYSTEM		
		Midcontinent Communications			
		BUSINESS NAME(S) OF OWNER	OF CABLE SYSTEM (IF DIFFERENT	)	
		MAILING ADDRESS OF OWNER	OF CABLE SYSTEM		
		PO Box 5040 (Number, street, rural route, apartment, or sui	te number)		
		Sioux Falls, SD 57117-50 (City, town, state, zip)			
С				entify the business and operation of the ne system, if different from the addres	
System	1	IDENTIFICATION OF CABLE SYSTEM	:		
		MAILING ADDRESS OF CABLE SYST	EM:		
	2	PO Box 5040 (Number, street, rural route, apartment, or suit	te number)		
			*		

DATE RECEIVED

8/20/2019

FOR COPYRIGHT OFFICE USE ONLY

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AMOUNT

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

Sioux Falls, SD 57117-5040

(City, town, state, zip code)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
HUITE	Midcontinent Communications	29666
D	Instructions: List each separate community served by the cable system. A "c "a separate and distinct community or municipal entity (including unincorpo discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community th as the "first community." Please use it as the first community on all future fi	rated communities within unincorporated areas and including single, at you list will serve as a form of system identification hereafter known
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or i identified city.	mobile home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	South Heart	ND
Community	Belfield	ND
	Dickinson	ND
Add Rows as Necessary	Dickinson-outs	ND

	LEGAL NAME OF OWNER OF CA	BLE SYSTEM:						FORM SA1-	TEM ID
Name	Midcontinent Communic								2966
E Secondary Transmission	SECONDARY TRANSMISSION In General: The information in sp system, that is, the retransmission about other services (including p last day of the accounting period	pace E should in of television ay cable) in sp (June 30 or D	cover al and rad ace F, n ecembe	Il categories of io broadcasts not here. All the r 31, as the ca	secondary by your system facts you se may be	stem to subscrib state must be th ).	ers. Give i nose existii	nformation ng on the	
Service: Sub- scribers and Rates	Number of Subscribers: Both down by categories of secondary each category by counting the nu separately for the particular servi 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 categories, that person or entity subscriber who pays extra for ca first set" and would be counted of Block 2: If your cable system h	r transmission umber of billing ce at the rate harged for eac (Example: "\$2 ounts allowed in space E, the to their subsc Where an ine should be cour ble service to ance again und has rate catego	service. as in that ndicated h catego 20/mth"). for adva e form lis ribers. C dividual nted as a additiona er "Serv pries for	In general, yo t category (the d—not the num bry of service. . Summarize a nce payment. sts the categor Give the numbe or organization a subscriber in al sets would b ice to addition secondary trai	u can com number of her of sets Include bo ny standar ries of seco er of subsc n is receivin each appl e included al set(s)."	pute the number persons or orga s receiving servi th the amount of d rate variations ondary transmiss ribers and rate fing service that fa icable category. in the count und service that are	of subscri anizations ce). the charg within a p sion service or each list alls under of Example: der "Servic different fro	bers in charged e and the articular rate e that cable red category different a residential e to the com those	
	printed in block 1 (for example, ti with the number of subscribers a sufficient.	nd rates, in the					on of the se	ervice is	
	BLC	OCK 1 NO. OF					BLOCK	. 2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SEF	RVICE	SUBSCRIBERS	RAT
	Residential:		628	22.05	Rucino	siness Accounts			22.9
	<ul> <li>Service to first set</li> <li>Service to additional set(s)</li> </ul>		028	22.95		of Converter	30 194	. 22 8.	
	• FM radio (if separate rate)								
	Motel, hotel		77	7.00					
	Commercial		161	72.95					
	Converter		710	3.00					
	<ul> <li>Residential</li> <li>Non-residential</li> </ul>								
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, th service for a single fee. There are furnished at cost or (2) services of amount of the charge and the un 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 s brief (two- or three-word) descrip	e (not subscrib nose services to e two exceptio or facilities furr it in which it is rate column. e charged by to your cable sys- separate charg	ber) infor that are ns: you hished to usually he cable stem furr e was m	mation with re not offered in of do not need to p nonsubscribe billed. If any ra e system for ea nished or offer nade or establi	spect to al combinatio give rate i rs. Rate in ates are ch ach of the a ed during t	n with any secon nformation conc formation should arged on a varia upplicable servic he accounting p	ndary trans erning (1) d include b ble per-pro es listed. eriod that y	emission services oth the ogram basis, were not	
		BLO		000/05		D • 75	0.7=1	BLOCK 2	
	CATEGORY OF SERVICE Continuing Services:	RATE		ORY OF SER		RATE	CATEGO	DRY OF SERVICE	RAT
	Pay cable	16.00	• Mot	el, hotel		50.00	Digital		10.0
	Pay cable—add'l channel			nmercial		50.00	Digital		3.
	Fire protection     Burglar protection		-	<pre>v cable v cable-add'l cl</pre>	annel		Starz!&	orts & Vareity	9.0 16.0
	•Burgiar protection			protection			Cinema		16.0
	First set	35.00		glar protection			ТМС		16.0
	<ul> <li>Additional set(s)</li> </ul>	25.00		services:				Espanol	4.(
	<ul> <li>FM radio (if separate rate)</li> </ul>		• Rec	connect		75.00			
	Converter			connect		-			
				let relocation	222	25.00 25.00			

counting Period:	2019/1			FORM SA1-2E. PAGE 3
Name	LEGAL NAME OF OWNER OF			SYSTEM ID#
	Midcontinent Commu			29666
	PRIMARY TRANSMITTERS:			
<b>G</b> Primary	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(6	ntify every television station (including m 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	f (1) stations carried only on a part- ne carriage of certain network progr	time basis under ams [sections
nsmitters: elevision	Substitute Basis Stations basis under specific FCC ru • Do not list the station here station was carried only on		ne Special Statement and Program	Log)—if the
	basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on t		see page (v) of the general instruct program services such as HBO, ESI e-air designation. For example, rep	tions. PN, etc. Identify each ort multistream
	of license. For example, W <b>Column 3:</b> Indicate in each educational station, by ente	el number the FCC assigned to the tele RC is channel 4 in Washington, D.C. a case whether the station is a network wring the letter "N" (for network), "N-M" ( "E" (for noncommercial educational), c	station, an independent station, or a for network multicast), "I" (for indep	a noncommercial endent), "I-M"
	For the meaning of these te <b>Column 4:</b> Give the location	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	ictions in the paper SA1-2 form. the community to which the station	is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KBMY-DT	17	Ν	BISMARCK, ND (ABC)
	KBMY-DT2	17.2	I-M	BISMARCK, ND (TJN)
	KBMY-DT3	17.3	I-M	BISMARCK,ND(WDAY XTRAHD)
Necessary	KDSE-DT	9	E	DICKINSON, ND (PBS)
	KDSE-DT2	9.2	E-M	DICKINSON,ND(PBS WRLD/LIF)
	KDSE-DT3	9.3	E-M	DICKINSON, ND (PBS MN HD)
	KDSE-DT4	9.4	E-M	DICKINSON, ND (PBS KIDS)
	KNDM DT	24	I	MINOT, ND (HEROES)
	KFYR-DT2	31.2	I-M	BISMARCK, ND (FOX-KNDX)
	KQCD-DT	7	Ν	DICKINSON, ND (NBC)
	KQCD-DT3	7.3	I-M	DICKINSON, ND (ME TV)
	KXMA-DT	19		DICKINSON, ND (CW)
	KXMA-DT2	19.2	N-M	DICKINSON, ND (CBS)

EGAL NAME OF	OWNER OF C	CABLE SY	STEM:					SYSTEM ID
Midcontinen	t Commun	ication	S					2966
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) on the basis of For detailed info paper SA1-2 for <b>Column 1:</b> lo <b>Column 2:</b> S <b>Column 3:</b> If ignal, indicate	it is carried by monitoring, to prmation about m. dentify the call tate whether to the radio stat this by placing	y the sys be recein to the Co sign of e the static ion's sign g a check	I-Band FM Carriage: Under ( tem whenever it is received a ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process mark in the "S/D" column. on (the community to which th	t the system's he system's FM ante this point, see pa ed by the cable s	adend, and (2 enna, during c ge (v) of the g system as a se	2) it can ertain st general i eparate	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters: Radio
			the community with which the			,		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

	od: 2019/1						FOR	RM SA1-2E. PAGE 5.
News	LEGAL NAME OF OWNER OF	CABLE SYST	TEM:					SYSTEM ID#
Name	Midcontinent Commur	nications						29666
	SUBSTITUTE CARRIAGI	E: SPECIA		NT AND PROGRAM LO	G			
	In General: In space I, identi	ify every non	nnetwork televis	<i>sion program</i> , broadcast by	a distant stat	on, that you	ur cable syste	em carried on a
	substitute basis during the a							
Substitute	explanation of the programm	ing that mus	t be included in	this log, see page (v) of the	e general instr	uctions in th	e paper SA1	-2 form.
Carriage:	1. SPECIAL STATEMEN	T CONCER	NING SUBST	TITUTE CARRIAGE				
Special	<ul> <li>During the accounting per</li> </ul>	iod, did your	r cable system	carry, on a substitute basi	is, any nonnei	work televi	<u>sion</u> prograr	n
Statement and Program Log	broadcast by a distant sta	tion?					YES	× NO
Trogram Log	Note: If your answer is "No'	" loovo thou	ract of this pag	o blank. If your answor is	"Yos " vou mi	- et complet		
	-	, leave the i	rest or tills pag	e blatik. Il your allswel is	res, you me	ist complete	e ille plogia	
	log in block 2. 2. LOG OF SUBSTITUTE		MS					
	In General: List each subst			te line. Use abbreviations	wherever pos	sible if thei	ir meaning is	5
	clear. If you need more spa						in mouning it	
	Column 1: Give the title	of every nor	nnetwork televi	sion program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor							
	"NBA Basketball: 76ers vs.		vies of baske	ibali. List specific program		ample, i Lo	We Lucy Of	
			lcast live, ente	r "Yes." Otherwise enter "N	lo."			
				sting the substitute progra				
				e community to which the			e FCC or, in	
	the case of Mexican or Can			tem carried the substitute			with the mo	nth
	first. Example: for May 7 giv		when your sys		program. Ose	numerais,	with the mo	
			substitute pro	gram was carried by your	cable system.	List the tim	nes accurate	ely
	to the nearest five minutes.							-
	stated as "6:00–6:30 p.m."		lists of successions					!
	to delete under FCC rules a			was substituted for progra				
		ina regulatio	mo in chect du	ring the accounting period			, listed progi	ann
	was substituted for program	nming that ve	our svstem wa		r FCC rules a	nd regulation	ons in	
	was substituted for program effect on October 19, 1976.		our system wa	s permitted to delete unde	r FCC rules a	nd regulation	ons in	
			our system wa			-		T
	effect on October 19, 1976.		-	s permitted to delete unde	WHE	N SUBST	ITUTE	7. REASON FOR
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		7. REASON FOR DELETION
	effect on October 19, 1976.	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI	N SUBST		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
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	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		
	effect on October 19, 1976.	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.		

	LEGAL NAME	OF OWNER OF CAI	BLE SYSTEM:							SA1-2E. PAGE
Name	Midcontir	nent Commu	nications							296
<b>K</b> Gross Receipts	all amounts (as identifie page (vii) of Gross	s: The figure yo (gross receipts d in space E) d the general ins receipts from su	<ul> <li>a) paid to you uring the ac structions loo ubscribers for</li> </ul>	ur cable syste counting period cated in the part or secondary t	m by subso od. For a fu aper SA1-2 transmission	ribers for the ther explana form. n service(s)	e system's ition of hov	secondary tra v to compute t	nsmission ser his amount, se	vice ee
		the accounting IT: You must co							*	63,356.36 gross receipts)
L Copyright Royalty Fee	Instructions: • Complete b • Use block 1 • Use block 2 • Use block 3	<b>ROYALTY FI</b> To compute the lock 1, block 2, if the amount of if the amount of f the general in:	e royalty fee or block 3. of gross rece of gross rece of gross rece of gross rece	eipts in space eipts in space eipts in space	K is more t K is more t	han \$137,10 han \$263,80	0 but less	than \$527,600		
			BLC	OCK 1: GRO	SS RECEII	PTS OF \$13	7,100 OR	LESS		
		As a cable syst period is \$52.00	em with gros	s receipts of \$	137,100 or l	ess, the roya	Ity fee that	you must pay f	or this six-mon	:h
		alty fee for accou								
		,	01							
	Line 2. Inter	est charge. Ente	er the amour	It from line 4, s	space Q, pag	ge 8				0.00
	Line 3. TOT	AL ROYALTY F	EE PAYABL	LE FOR ACCC	DUNTING PI	ERIOD Add I	ines 1 and 2	2	··· <u> </u>	
		BLOO	CK 2: GROS	SS RECEIPT	S OF \$263	,800 OR LE	SS (but m	ore than \$13	7,100)	
	1. Base amo	ount under statut	tory formula.				\$	263,800.0	<u>)</u>	
	2. Enter amo	ount of gross rec	ceipts from sp	расе К			\$	163,356.30	<u>}</u>	
	3. Subtract I	ine 2 from line 1					\$	100,443.64	<u> </u>	
	4. Enter the	amount of gross	s receipts from	m space K				\$	163,356.36	_
	5. Enter the	amount from line	e 3					\$	100,443.64	_
	6. Subtract I	ine 5 from line 4						\$	62,912.72	_
	7. Multiply lin	ne 6 by .005 (en	ter figure her	re)					\$	314.56
	8. Interest cl	narge. Enter the	e amount fror	n line 4, space	e Q, page 8					0.00
	9. TOTAL R	OYALTY FEE F	PAYABLE FO	OR ACCOUNT	ING PERIO	D. Add lines	7 and 8		<b>\$</b>	314.56
		BLOCI	K 3: GROS	S RECEIPTS	OF MORE	E THAN \$26	3,800 (but	t less than \$5	27,600)	
	1. Enter the	amount of gross	s receipts from	m space K						
		ount under statut							)	
		ine 2 from line 1								
		ne 3 by .01								
	5. Royalty d	ue on the first \$2	263,800 of gr	ross receipts (ı	under statuto	ory formula) .		. \$	1,319.00	-
	6. Interest cl	narge. Enter the	e amount fror	m line 4, space	e Q, page 8 .				0.00	-
	7. TOTAL R	OYALTY FEE F	AYABLE FO	OR ACCOUNT	ING PERIO	D. Add lines	4. 5. and 6			-
		-								
			FILING	FEE AND TO	I AL REMI	TANCE DI	JE			
Filing Fee and	1. Royalty F	ee Payable for A	Accounting P	eriod (from Blo	ock 1, 2, or 3	, above)		. \$	314.56	
Total Remittance Due		(See the instruc	-						20.00	-
	2. Thing T 66				on ming icc	calculations)		· · · ·	20.00	_
	3. TOTAL A	MOUNT DUE F	OR ACCOU	NTING PERIO	D. Add line	es 2 and 3			\$	334.56
	1							ble to the Reg		

Accounting Period:	2019/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Midcontinent Communications	SYSTEM ID# 29666
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	13 380
N Individual to 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 Information	Name Wynne Haakenstad Telephone	952-844-2622
	Address 3600 Minnesota Drive, STE 700 (Number, street, rural route, apartment, or suite number) Edina, MN 55435 (City, town, state, zip)	
	Email wynne.haakenstad@midco.com Fax (optional)	
O 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> <li>(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.</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. [18 U.S.C., Section 1001(1986)]</li> <li>(Is U.S.C., Section 1001(1986)]</li> <li>K /s/ Wynne Haakenstad</li> <li>Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)</li> </ul>	stem as identified
	Typed or printed name: Wynne Haakenstad	
	Title: Director of Programming (Title of official position held in corporation or partnership) Date: 08/08/19	

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 fing, a determination that would be made by a court of lave

unting Period: 2019/1	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
continent Communications	296
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: <ul> <li>"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 se scribers and amounts collected from subscribers receiving secondary 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</li></ul>	ub- Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below.	
Name     Mailing Address	
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. Line 1 Enter the amount of late payment or underpayment	Q
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