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

STATEME			FOR COPYRIGH	IT OFFICE USE ONLY	Return completed workbook by email to:
		nsmissions by	DATE RECEIVED	AMOUNT	
Cable Syster	ns (S	hort Form)		\$	<u>coplicsoa@loc.gov</u> For additional information, contact the U.S. Copyright
General instruc			08/05/2019		Office Licensing Division at:
in the first tab c	of this v	workbook		ALLOCATION NUMBER	Tel: (202) 707-8150
Α	ACCC	OUNTING PERIOD COVERED E	BY THIS STATEMENT: (YY	'YY/(Period))	
		2019/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		20191	Barcode Data Filing Period (optional	- see instructions)	
Accounting Period					
В		Instructions: Give the full legal name of the owner of th of the subsidiary, not that of the parent co		diary of another corporation, give the full corp	porate title
Owner		List any other name or names under which	the owner conducts the business of th	ne cable system.	
		If there were different owners during the a single statement of account and royalty fee		he last day of the accounting period should sι ing period.	ıbmit a
		Check here if this is the system's first filing	. If not, enter the system's ID number a	assigned by the Licensing Division.	6098
		LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM		
		CABLE & CELLULAR COMMUNICAT	IONS, LLC		
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)		
		MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
		P.O. BOX 280 (Number, street, rural route, apartment, or suite nu	umber)		
		CIRCLE, MT 59215 (City, town, state, zip)			
С				tify the business and operation of the system, if different from the address	
System	1	IDENTIFICATION OF CABLE SYSTEM:			
		MAILING ADDRESS OF CABLE SYSTEM:	:		
	2	(Number, street, rural route, apartment, or suite nu			
		(City, town, state, zip code)			

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

Nome	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
Name	CABLE & CELLULAR COMMUNICATIONS, LLC	6098
D	Instructions: List each separate community served by the cable system. A " "a separate and distinct community or municipal entity (including unincorpor 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 to 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.	
	CITY OR TOWN	STATE
First	GLENDIVE	МТ
Community		
dd Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					SYS.	TEM ID
Name	CABLE & CELLULAR C	OMMUNICA		S, LLC					609
_	SECONDARY TRANSMISSION	SERVICE: SL	JBSCRI	BERS AND R	ATES				
E	In General: The information in s					y transmission	service of	he cable	
<b>.</b> .	system, that is, the retransmission								
Secondary Transmission	about other services (including plast day of the accounting period						those exist	ing on the	
Service: Sub-	Number of Subscribers: Both	·				,	ble system	, broken	
scribers and	down by categories of secondar								
Rates	each category by counting the n			0,0		•		charged	
	separately for the particular serv							ro and the	
	<b>Rate:</b> Give the standard rate of unit in which it is generally billed	-	-	•					
	category, but do not include disc	• •	,		ny standa		is within a		
	Block 1: In the left-hand block	in space E, th	e form li	ists the catego	ries of sec	ondary transmi	ssion servi	ce that cable	
	systems most commonly provide								
	that applies to your system. <b>Not</b> 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.	and rates, in the	e right-h	and block. A t	vo- or thre	e-word descrip	tion of the s	service is	
		DCK 1					BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RATI
	Residential:								
	Service to first set		1,597	34.20					
	Service to additional set(s)								
	• FM radio (if separate rate)								
	Motel, hotel		46	13.20					
	Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s				
F	In General: Space F calls for ra								
ſ	not covered in space E, that is, t					,	,		
Services	service for a single fee. There ar furnished at cost or (2) services	•			•		• • •		
Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		-	-		-		-	
	Block 1: Give the standard rat							wore not	
ransmissions:		l vour capie sv					penou mai		
Rates	Block 2: List any services that	• •	ie was n		-	-	vices in the	e form of a	
		separate charg		nade or establ	-	-	vices in the	e form of a	
	<b>Block 2:</b> List any services that listed in block 1 and for which a	separate chargotion and includ	de the ra	nade or establ	-	-	vices in the		
	<b>Block 2:</b> List any services that listed in block 1 and for which a	separate charg	de the ra	nade or establ	shed. List	-		BLOCK 2	RATE
	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip	separate chargotion and includ	de the ra CK 1 CATEG	nade or establ ate for each.	shed. List	these other ser		BLOCK 2	RATE
	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE	separate chargotion and includ	de the ra CK 1 CATEG Installa	nade or establ ate for each. GORY OF SER	shed. List	these other ser		BLOCK 2 DRY OF SERVICE	
	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	separate chargotion and includ	de the ra CK 1 CATEG Installa • Mot	nade or establ ate for each. GORY OF SER ation: Non-res	shed. List	these other ser		BLOCK 2 DRY OF SERVICE E	RATE 109.2 124.2
	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	separate chargotion and includ	de the ra CK 1 CATEG Installa • Mot • Cor	nade or establ ate for each. GORY OF SER ation: Non-res tel, hotel	shed. List	these other ser		BLOCK 2 DRY OF SERVICE	109.2 124.2
	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	separate chargotion and includ	de the ra CK 1 CATEG Installa • Mot • Cor • Pay	nade or establ ate for each. GORY OF SER ation: Non-res tel, hotel nmercial	vice	these other ser	CATEGO CHOIC ULTIM/ STARZ	BLOCK 2 DRY OF SERVICE E	109.2
	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	separate chargotion and includ	de the ra CK 1 CATEG Installa • Mot • Cor • Pay • Pay	nade or establ ate for each. GORY OF SER ation: Non-res tel, hotel nmercial v cable	vice	these other ser	CATEGO CHOIC ULTIM/ STARZ	BLOCK 2 DRY OF SERVICE E ATE /ENCORE	109.2 124.2 13.9
	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection	separate chargotion and includ	de the ra CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire	made or establ ate for each. GORY OF SER ation: Non-res tel, hotel nmercial v cable v cable-add'l ch	vice	these other ser	CATEGO CHOIC ULTIMA STARZ SHOW	BLOCK 2 DRY OF SERVICE E ATE /ENCORE	109.2 124.2 13.9 13.9
	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	separate chargo bion and inclue BLOO RATE	de the ra CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur	made or establ ate for each. GORY OF SER ation: Non-res tel, hotel mmercial / cable / cable-add'l ch e protection	vice	these other ser	CATEGO CHOIC ULTIMA STARZ SHOW	BLOCK 2 DRY OF SERVICE E ATE /ENCORE	109.2 124.2 13.9 13.9
	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	separate chargo bion and inclue BLOO RATE	de the ra CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bun Other s	nade or establ ate for each. GORY OF SER ation: Non-res tel, hotel mmercial ( cable ( cable-add'l ch e protection glar protection	vice	these other ser	CATEGO CHOIC ULTIMA STARZ SHOW	BLOCK 2 DRY OF SERVICE E ATE /ENCORE	109.2 124.2 13.9 13.9
	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s)	separate chargo bion and inclue BLOO RATE	de the ra CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur • Bur • Rec	ande or establ ate for each. GORY OF SER ation: Non-res tel, hotel mmercial cable cable-add'l ch protection glar protection services:	vice	RATE	CATEGO CHOIC ULTIMA STARZ SHOW	BLOCK 2 DRY OF SERVICE E ATE /ENCORE	109.2 124.2 13.9 13.9
	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	separate chargo bion and inclue BLOO RATE	de the ra CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s • Rec • Disc	ande or establ ate for each. GORY OF SER ation: Non-res tel, hotel mmercial ( cable ( cable-add'l ch protection glar protection services: connect	vice	RATE	CATEGO CHOIC ULTIMA STARZ SHOW	BLOCK 2 DRY OF SERVICE E ATE /ENCORE	109.2 124.2 13.9 13.9

FORM SA1-2E. PA
SYSTEN
6
N OF STATION

								SYSTEM
JADLE & UE			JNICATIONS, LLC					6
	every radio s	tation ca	rried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of r For detailed info paper SA1-2 for <b>Column 1:</b> Id <b>Column 2:</b> Si <b>Column 3:</b> If ignal, indicate t	it is carried by monitoring, to rrmation abou m. entify the call tate whether t the radio stati this by placing	y the sys be recei t the Co sign of e he statio ion's sign g a check	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on t each station carried. n is AM or FM. nal was electronically processes (mark in the "S/D" column.	the system's he system's FM antr his point, see pa ed by the cable s	eadend, and (2 enna, during ca ge (v) of the g system as a se	ertain st eneral ir eneral ir	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
			on (the community to which the the community with which the			C or, in ⊧	the case of	
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		·						
		·						
		·						
		·						
		·						

Accounting Perio	od: 2019/1						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	CABLE & CELLULAR	соммим	NICATIONS,	LLC				6098
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	INT AND PROGRAM LO	)G			
	In General: In space I, ident	tify every no	onnetwork telev	<i>ision program,</i> broadcast by	y a <i>distant</i> sta	tion, that y	our cable sys	stem carried on a
	substitute basis during the a	• • •		•				
Substitute	explanation of the programn	ning that mu	ist be included	in this log, see page (v) of t	the general in	structions i	n the paper S	SA1-2 form.
Carriage:	<b>1. SPECIAL STATEMEN</b>		RNING SUBS	TITUTE CARRIAGE				
Special	<ul> <li>During the accounting pe</li> </ul>	riod, did yo	ur cable syste	n carry, on a substitute ba	asis, any noni	network te	levision prog	Iram
Statement and	broadcast by a distant sta							NO
Program Log	broadcast by a distant sta						YES	NO
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you i	must com	plete the pro	gram
	log in block 2.							
	2. LOG OF SUBSTITUT	E PROGR	AMS					
	In General: List each subs			ate line. Use abbreviation	s wherever p	ossible. if	their meanin	a is
	clear. If you need more spa	ace, please	add additiona	rows to the tables.		,		5
				vision program ("substitute	e program") t	hat, during	the accoun	ting
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general catego		ovies" or "bask	etball." List specific progra	am titles, for e	example, "	I Love Lucy'	or
	"NBA Basketball: 76ers vs.		depet live ant	ar "Vac" Otherwise enter	"NIo."			
				er "Yes." Otherwise enter " casting the substitute prog				
				the community to which th		censed hv	the ECC or	in
	the case of Mexican or Cal							
				stem carried the substitute			als. with the	month
	first. Example: for May 7 gi		,		e pregram e			
	. , , ,		e substitute pr	ogram was carried by you	ır cable syste	m. List the	times accu	ately
	to the nearest five minutes							
	stated as "6:00-6:30 p.m."							
					reneration of the or	t vour evet	em was rea	uired
	Column 7: Enter the let							
	to delete under FCC rules	and regulat	ions in effect o	luring the accounting perio	od; enter the	letter "P" if	the listed p	
	to delete under FCC rules was substituted for program	and regulat	ions in effect o	luring the accounting perio	od; enter the	letter "P" if	the listed p	
	to delete under FCC rules	and regulat	ions in effect o	luring the accounting perio	od; enter the	letter "P" if	the listed p	
	to delete under FCC rules was substituted for program	and regulat	ions in effect o	luring the accounting perio	od; enter the der FCC rules	letter "P" if and regu	the listed pi lations in	
	to delete under FCC rules was substituted for prograr effect on October 19, 1976	and regulat mming that	tions in effect of your system w	luring the accounting period as permitted to delete und	od; enter the der FCC rules WHE	letter "P" if s and regu	the listed pilations in	rogram
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that 	tions in effect of your system w	luring the accounting period as permitted to delete und	od; enter the der FCC rules WHE CARRI	N SUBST	the listed privations in TTUTE	
	to delete under FCC rules was substituted for prograr effect on October 19, 1976	and regulat mming that	tions in effect of your system w	luring the accounting period as permitted to delete und	od; enter the der FCC rules WHE	N SUBST	the listed pilations in	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat mming that  UBSTITUT 2. LIVE?	E PROGRAM	luring the accounting period as permitted to delete und	WHE CARRI 5. MONTH	N SUBST	TITUTE TITUTE TIMES	7. REASON FOR

Accounting Period:	2019/1		FORM S	6. SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE & CELLULAR COMMUNICATIONS, LLC		S	6098
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amo all amounts (gross receipts) paid to your cable system by subscribers for the system's se (as identified in space E) during the accounting period. For a further explanation of how to 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.	condary transm o compute this a	ission service amount, see \$ 32	
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 tha • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less tha See page (vi) of the general instructions located in the paper SA1-2 form for more information	an \$527,600	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 y accounting period is \$52.00	ou must pay for	this six-mon <sup>,</sup>	
	Line 1. Royalty fee for accounting period			
	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	2		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but mo	ore than \$137,1	00)	
	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 \$263,800 (but	less than \$527,	600)	
	1. Enter the amount of gross receipts from space K	324,348.95		
	2. Base amount under statutory formula	263,800.00		
	3. Subtract line 2 from line 1	60,548.95		
	4. Multiply line 3 by .01	. \$	605.49	
	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.		\$	1,924.49
	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)	\$	1,924.49	
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		\$	1,944.49
	Important: Your remittance must be in the form of an electronic payment paya See page i of the general instructions in the paper SA1-2 form for	-		ghts!

Name     Eldow two of control contro control control control control control	Accounting Period:	2019/1			FORM SA1-2E. PAGE 7.
M       Instructions: You must give (1) the number of channels on which the cable system scaled bisevises besides absorbers is automated in a subsorbers, and (2) the cable system's biad number of activated channels during the accounting period.       15         1. Enter the totic number of channels on which the cable system is biad number of activated channels in which the cable system is biad number of activated channels in the cable system is biad number of activated channels in which the cable system carried television broadcast attains:       15         N       MONDOUNL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (dentify an individual to whom and individual to activate attained activate individual to activate indin the activate activate individual to activate individual to activa	Name			:	
and nonknowladatist services       10         N       Individual To BE CONTACTED IF FURTHER INFORMATION IS NEEDED (identify an individual to whom we can contact about this statement of account.)         Be Contacted       Name       Annie Edwards         Name       Annie Edwards       Telephone       406-485-3301         Address       P.O. Box 280       Output the statement of account must be certified and signed in accordance with Copyright Office regulations)         Email       Interceg@midflwers.coop       Fax (optional)         Email       Interceg@midflwers.coop       Fax (optional)         Certification       • 1. the undersigned, hereity certify that (Check one. <i>bur oxy one, of the bases.</i> )       • 0 (Oner other than corporation or partnership) 1 am the output of the cable system as identified in line 1 of space B; or         • 0 (Oner other than corporation or partnership) 1 am the output of the cable system as identified in line 1 of space B; or       • 0 (Oner other than corporation or partnership) 1 am the duty authorized agent of the cable system as identified in line 1 of space B; or         • 1 have constrained the statement of account and hereby declare under partnership of the legit entity identified ac ounser of the cable system as identified in line 1 of space B; information, and belief, and are made in good faith.         I base constrained the statement of baccount and hereby declare under partnership of the legit entity identified ac ounser of the cable system as identified in the cable system in the cable system in the cable system in the cable system in the ca		Instructions: Yo to its subscribers 1. Enter the total system carried 2. Enter the total	s, and (2) the cable system's total num number of channels on which the ca television broadcast stations number of activated channels	ber of activated channels during the accounting period.	
Individual to Be Contacted for Further Information       Name       Annie Edwards       Telephone 406-485-3301         Address       F.O. Box 280 (Nutrice, steer, related and individual systematic, or table hurbes)       Enclose       For (optional)         Circle, MT 59215 (City toat, table 2g)       Enclose       Fax (optiona)         Circle, MT 59215 (City toat, table 2g)       For (optional)         Circle, MT 59215 (City toat, table 2g)       Fax (optiona)         Circle, MT 59216 (City toat, table 2g)       Fax (optiona)         Circle, MT 59216 (City toat, table 2g)       Fax (optiona)         Circle, MT 59215 (City toat, table 2g)       Fax (optiona)         Circle, MT 59216 (City toat, table 2g)       Fax (optiona)         Circle, MT 59216 (City toat, table 2g)       Fax (optiona)         Circle, MT 59216 (City toat, table 2g)       Fax (optiona)         Circle, MT 59217 (City toat, table 2g)       Fax (optiona)         Circle, MT 59218 (City toat, table 2g)       Fax (optiona)         Circle, MT 59218 (City toat, table 2g)       Fax (optiona)         Immediate a scenario of partmership) I am the oxener of the cable system as identified in line 1 of space B; or         Immediate a comparison or partmership) I am the day authorized agent of the oxener of the cable system In line 1 of space B.         Immediate a comparison or partmership) I am the day authorized agent of table, (If a partmership)		and nonbroadca	ast services		15
Information       Address       P.O. Box 280 P.O. Box 280 (Whenew, there is used in united application of a state number)         Circle, MT 59215 (City, town, tide, cp)       Ernal       Interceg@midthvers.coop       Fax (optional)         Control of the undersigned, hereby certify that (Check one, but only one, of the boxes.)       - 1, the undersigned, hereby certify that (Check one, but only one, of the boxes.)       - 1, the undersigned, hereby certify that (Check one, but only one, of the boxes.)         Certification       - 4, the undersigned, hereby certify that (Check one, but only one, of the boxes.)       - 1, the undersigned, hereby certify that (Check one, but only one, of the boxes.)         Certification       - 4, the undersigned, hereby certify that (Check one, but only one, of the boxes.)       - 1, the undersigned, hereby certify that (Check one, but only one, of the boxes.)         Certification       - 4, the undersigned is a state on an officer (if a corporation or partnership) I am the owner is not a corporation or partnership) of the legal entity identified as owner of the cable system as identified in line 1 of space B; or         No       (Officer or partno) I an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system are two complex, and corect to the best of my knowledge, information, and bellef, and are made in good fait.         (18 U.S.C., Section 1001(1986))       Err an electronic ignature on the line above to certify this statement. Error signature using an 'f/s ignature" (e.g., f/s) John Smith)         Typed or printed name:       Dennis Green <th>Individual to</th> <th></th> <th></th> <th>ORMATION IS NEEDED (Identify an individual to whom</th> <th></th>	Individual to			ORMATION IS NEEDED (Identify an individual to whom	
Image: Section and notes, agartered; or subs number!         Circle, used, star, add         Circle, used,		Name	Annie Edwards	Telephone	406-485-3301
(City, Usin, state, ze)         Email       microg@middivers.coop         Fax (optional)         Fax (optional)         Certification         • 1, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)         • 0         • 1, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)         • 1, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the cable system as identified in line 1 of space B; or         • (Agent of owner other than corporation or partnership) I am the duy authorized agent of the owner of the cable system as identified in line 1 of space B; or         • (Agent of owner other than corporation or partnership) I am the duy authorized agent of the owner of the cable system as identified in line 1 of space B; or         • (Agent of owner other than corporation) or partnership) of the legal entity identified as owner of the cable system 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)]       Image: Section 1001(1986)         Typed or printed name:       Dennis Green         Title:       President         (The of efficient herein logenchined in exponation or partnership)		Address	P.O. Box 280 (Number, street, rural route, apartment, or s	uite number)	
O       Certrification         Certrification          • 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; or          (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified         in line 1 of space B and that the owner is not a corporation or partnership; or          (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system         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.         (19 U.S.C., Section 1001(1986))          Enter an electronic signature on the line above to certify this statement.         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:          Dennis Green          Title:          President          Title:          President					
O       • 1. the undersigned, hereby certify that (Check one, but only one, of the boxes.)		Email	mrtcreg@midrivers.co	op Fax (optional)	
O       • 1. the undersigned, hereby certify that (Check one, but only one, of the boxes.)			(This statement of account must be c	ertified and signed in accordance with Copyright Office regulations)	
(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership) of the legal entity identified as owner of the cable system in line 1 of space B. (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. (If a use examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and corpect to the best of my knowledge, information, and belief, and are made in good faith. (If 8 U.S.C., Section 1001(1986))	-				
(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or a partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system 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 complete					B; or
In line 1 of space B and that the owner is not a corporation or partnership; or  Image: Construction of the cable system an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system 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))  Image: Construction of signature on the line above to certify this statement. Enter an electronic signature using an "/s/ signature" (e.g., /s/ John Smith)  Typed or printed name: Dennis Green  Title: President  (Title of official position heid in corporation or partnership)					
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)]		in l	line 1 of space B and that the owner is	not a corporation or partnership; or	
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)]				oration) or a partner (if a partnership) of the legal entity identified as ow	ner of the cable system
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: Dennis Green Title: President (Title of official position held in corporation or partnership)		are true, complete	e, and correct to the best of my knowle		1
Typed or printed name:       Dennis Green         Title:       President         (Title of official position held in corporation or partnership)			I <b>F</b> _×	/s/ Dennis Green	
Title: President (Title of official position held in corporation or partnership)					
Title: President (Title of official position held in corporation or partnership)			Tuned or printed neme	Dennis Green	
(Title of official position held in corporation or partnership)			ryped or printed name		
Date: July 30, 2019					
			Date:	July 30, 2019	

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 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 Office'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.

ounting Period: 2019/1	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
BLE & CELLULAR COMMUNICATIONS, LLC	609
<ul> <li>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 subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."     </li> <li>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.</li> <li>During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?     <li>NO</li> <li>YES. Enter the total here and list the satellite carrier(s) below</li> </li></ul>	P Special Statement Concerning Gross Receipts Exclusion
Name     Name       Mailing Address     Mailing Address	
You must complete this worksheet for these revelty payments submitted as a result of a late payment or undergoyment	
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 Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q Interest Assessmen
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 Interest Assessmen
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 Interest Assessmen
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 Interest Assessmen
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 Interest Assessmen
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 Interest Assessment
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 Interest Assessmen
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 Interest Assessmer
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 Interest Assessment
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 Interest Assessmen
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 Interest Assessmen
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 Interest Assessment

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 th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The 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.