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

Return completed workbook FOR COPYRIGHT OFFICE USE ONLY by email to: STATEMENT OF ACCOUNT for Secondary Transmissions by DATE RECEIVED AMOUNT coplicsoa@copyright.gov Cable Systems (Short Form) \$ For additional information, contact the U.S. Copyright General instructions are located Office Licensing Division at: 8-27-19 Tel: (202) 707-8150 in the first tab of this workbook ALLOCATION NUMBER

Α	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2019/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
Accounting		20191 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.	
		6 Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	3612
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		Venture Communications Coop.	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		PO Box 157 (Number, street, rural route, apartment, or suite number)	
		Highmore, SD 57345	
		(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 unl s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in sp	
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 fing, a determination that would be made by a court of law.

Nome	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Venture Communications Coop.	63612
D Area	Instructions: List each separate community served by the cable system. A "com "a separate and distinct community or municipal entity (including unincorporate discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that y as the "first community." Please use it as the first community on all future filing Note: Entities and properties such as hotels, apartments, condominiums, or mo	munity" is the same as a "community unit" as defined in FCC rules: ed communities within unincorporated areas and including single, you list will serve as a form of system identification hereafter known gs.
Served	identified city.	
	CITY OR TOWN	STATE
First	Selby	SD
Community		
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM						FORM SA1	TEM ID
Name	Venture Communication							010	6361
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in sp system, that is, the retransmission about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the m separately for the particular servi	SERVICE: SU pace E should on of television ay cable) in sp (June 30 or D blocks in spa y transmission umber of billing	cover a and rac pace F, r ecembe ce E cal service. gs in tha	Il categories of tio broadcasts not here. All the er 31, as the ca Il for the numbe . In general, yo tt category (the	secondary by your sy facts you se may be er of subsc u can com number of	stem to subscrit state must be t). ribers to the cat pute the numbe f persons or org	bers. Give i hose existi ble system, r of subscr anizations	information ng on the broken ibers in	
	Rate: Give the standard rate c 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 o Block 2: If your cable system I printed in block 1 (for example, ti with the number of subscribers a sufficient.	(Example: "\$2 ounts allowed in space E, th to their subsc where an in should be coun ble service to once again und has rate catego iers of services and rates, in the	20/mth [*]) for adva e form li ribers. C dividual nted as addition er "Serv pries for that inc	Summarize a ance payment. ists the categor Give the numbe or organizatior a subscriber in al sets would b vice to additional secondary trai clude one or metal	ny standar ries of seco er of subsc n is receivin each appl e included al set(s)." nsmission ore second	rd rate variations ondary transmis ribers and rate t ng service that f icable category. I in the count un service that are dary transmissio	s within a p sion servic for each lis alls under Example: der "Servic different fr ins), list the on of the s	e that cable ted category different a residential te to the om those tem, together ervice is	
	BLC	DCK 1 NO. OF					BLOCK	X 2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RATI
	Residential:		400	00.05	Corro			40	40.0
	 Service to first set Service to additional set(s) 		183	80.95	Core My Cho	Nice		12 26	19.9 48.0
	• FM radio (if separate rate)							20	-0.0
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential								
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SECO In General: Space F calls for rat not covered in space E, that is, th service for a single fee. There ar 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 subscrit hose services e two exceptio or facilities furr it in which it is rate column. e charged by t your cable sys separate charg	ber) infor that are ns: you hished to usually he cable stem fur je was n	rmation with re not offered in o do not need to o 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 seco information cond formation shoul arged on a varia applicable servic he accounting p	ndary trans cerning (1) d include b able per-pro- ces listed. period that	smission services oth the ogram basis, were not	
		BLO					04756	BLOCK 2	
	CATEGORY OF SERVICE Continuing Services:	RATE		GORY OF SER		RATE	CATEGO	ORY OF SERVICE	RAT
	Pay cable	13.95		tel, hotel	acitiai	49.95	set top	box	9.
	Pay cable—add'l channel	18.95	• Cor	mmercial		49.95			
	Fire protection		• Pay	y cable					
	 Burglar protection 		-	y cable-add'l ch	nannel				
	Burgiur protection		. Eirc						
	Installation: Residential			e protection					
	Installation: Residential • First set	49.95	• Bur	rglar protection					
	Installation: Residential • First set • Additional set(s)	49.95 30.00	• Bur Other s	rglar protection services:					
	Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)		• Bur Other s • Red	rglar protection services: connect		49.95			
	Installation: Residential • First set • Additional set(s)		• Bur Other s • Rec • Dis	rglar protection services:		<u>49.95</u> 49.95			

	LEGAL NAME OF OWNER OF	CABLE SYSTEM		SYSTEM ID#
ne	Venture Communicat			63612
	PRIMARY TRANSMITTERS:	•		
ary itters: sion	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(et substitute program basis, an 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 a basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on the Column 2: Give the channed of license. For example, W Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these the Column 4: Give the location	also in space I, if the station was carrie in concerning substitute basis stations, i's call sign. <i>Do not</i> report origination I with a station according to its over-the	<i>t</i> (1) stations carried only on a part-tin the carriage of certain network program 51(e)(2) and (4))]; and (2) certain stati arried by your cable system on a sub- the 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, ESPI e-air designation. For example, report evision station for broadcasting over the 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 is	me basis under ms [sections ions carried on a stitute program .og)—if the on some other ons. N, etc. Identify each rt multistream he air in its community noncommercial indent), "I-M" inal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
		2	N	
	KDLO	3	N	FLORENCE, SD
	KDLO	4	N	FLORENCE, SD RELIANCE, SD
ary				
ary	KPRY	4	N	RELIANCE, SD
ary	KPRY KDLT	4 5	N N	RELIANCE, SD SIOUX FALLS, SD
iry	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
ary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
ssary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
ssary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
ssary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
essary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
ssary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
essary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
essary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
essary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
essary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
essary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
essary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
ressary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
sessary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
ecessary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD
Vecessary	KPRY	4	N	RELIANCE, SD
	KDLT	5	N	SIOUX FALLS, SD
	KTTW	7	N	SIOUX FALLS, SD
	KUSD	10	E	SIOUX FALLS, SD

Accounting P							FORM	/I SA1-2E. PAGE 4.
LEGAL NAME OF								SYSTEM ID#
Venture Con	nmunicatio		ор. 					63612
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cat					н
receivable if (1) on the basis of if For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: If signal, indicate	it is carried b monitoring, to prmation abou- rm. dentify the cal tate whether the radio stat this by placing	y the sys be recein at the Co l sign of a the static ion's sig g a check	I-Band FM Carriage: Under of the whenever it is received a wed at the headend, with the opyright Office regulations on each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which th	at the system's he system's FM ante this point, see pa sed 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, tated intervals. nstructions in the. and discrete	Primary Transmitters: Radio
Mexican or Can	adian station	s, if any,	the community with which the	e station is identifi	ed).			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		+						

Name ECAN. NME OF OWNER OF CANLE SYSTEM: SYSTEM ID/E SUBSITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG n. General: In space. I. Identify every nonexhork: develop ingram, broadcast by a diaker staton, that your cable system carrier on a subsituation of the programming that must be included in this fig. see page (v) of the general instructions in the page SA12 form. Subsitution: SPECIAL STATEMENT CONCENTIONE SUBSITUTE CARRIAGE Yes (v) on a subsitute basis, any nonexhork: developing more and form FCO to lines, regulations, and the program to an advectation of the program in the counting period, did your cable system carry, on a subsitute basis, any nonexhork: television program in the page SA12 form. Yes (v) and ansare is "No", leave the rest of this page blank. If your ansare is "Yes," you must complete the program in the program is "broits" in the open synthese statistical statistis statistical statististatistical statistical statistical	Accounting Perio	od: 2019/1						FOR	M SA1-2E. PAGE 5.
Venture Communications Coop. 63612 I SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space 1, identify every nonnetwork lelevision 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? • 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 the programming of another station. Do not use general categories like "movies" or "basketball." List specific program. "Low Lucy" or "NBA Basketball: TGer xws. Bulls." Column 2: If the program was broadcast iive, enter "Yes." Otherwise enter "No." Column 3: Give the ornhan ddg when your system carried by substitute program. Column 4: Give the broadcast station is clean: for wheny tour system carries thow inhor the station is ilcensted by t		LEGAL NAME OF OWNER OF	CABLE SYST	EM:					SYSTEM ID#
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, (idi your cable system carry, on a substitute basis, any nonnetwork television program. Foradcast by a distant station? * During the accounting period, (idi your cable system carry, on a substitute basis, any nonnetwork television program. To a substitute basis. * During the accounting period, (idi your cable system carry, on a substitute basis, any nonnetwork television program. To a substitute forgram 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 on on use general categories like "movies" or "bask tebal." Cor use, regulations, or authorizations. For your cable system substitute program. Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." 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 3: Give the call sign of the station program was carried by your c	Name	Venture Communication	ons Coop.						63612
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 mutuab 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, idid your cable system carry, on a substitute basis, any nonnetwork television program. To a further explanation of the programming that mutuab be included in this log, see page (v) of the general instructions in the paper SA1-2 form. *During the accounting period, idid your cable system carry, on a substitute basis, any nonnetwork television program. To a further explanation. *During the accounting period, idid your cable system carry, on a substitute basis, any nonnetwork television program. *During the accounting period, idid your cable system carried to the program of the program target. *Is used to the table. 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 on to use general categories like "movies" or "bask tebal." List specific program. 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 3: Give the call sign of the community with which the station is identifi		SUBSTITUTE CARRIAGI	: SPECIA			G			
Carriage: Special Statement and Program Log 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: 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? Image: Special Sp	I	In General: In space I, identi substitute basis during the a	fy every nor	nnetwork televis priod, under spe	<i>tion program,</i> broadcast by cific present and former FC	a <i>distant</i> stati C rules, regula	ations, or aut	horizations.	For a further
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? • Yes • Not 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. • L OG 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 "busbitute 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. Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the toral slag 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 "57." Column 6: State the times when the substitute program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the account		explanation of the programm	ing that mus	t be included in	this log, see page (v) of the	e general instru	uctions in the	paper SA1	-2 form.
Statement and Program Log During the accounting period, du you cable system carry, on a substitute basis, any nonnetwork tervision program broadcast by a distant station? Image: Terminal State Stat									
Program Log 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 titte 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 "novies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the call sign of the station is location (the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian stations are carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately 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." <		 During the accounting per 	od, did you	r cable system	carry, on a substitute basi	s, any nonnet	twork televisi	on 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: The program was broadcast live, enter "Yes." Otherwise enter "No." 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 to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, 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 "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a 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 <i>required</i> t		broadcast by a distant star	tion?					YES	× NO
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: The program was broadcast live, enter "Yes." Otherwise enter "No." 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 to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, 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 "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a 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 <i>required</i> t		Note: If your answer is "No'	, leave the i	rest of this pag	e blank. If your answer is '	'Yes," you mu	ist complete	the prograr	n
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Accounting Period:	2019/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SY	STEM ID#
	Venture Communications Coop.		63612
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmis (as identified in space E) during the accounting period. For a further explanation of how to compute this an 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.	ssion service mount, see	,398.85 s receipts)
L Copyright	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3.		
Royalty Fee	 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 \$20 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$27,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. 	63,800	
	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 th accounting period is \$52.00	nis six-mon	
	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 \$137,10	00)	
	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 \$527,6	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula \$ 263,800.00		
	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 Due	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
	EFT Trace # or TRANSACTION ID # 75822632375		
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more than the paper SA1-2 form and the Excel instructions tab for more than the second s		

Accounting Period:	2019/1			FORM SA1-2E. PAGE 7
Name		OWNER OF CABLE SYSTEM: nunications Coop.		SYSTEM ID# 63612
M Channels	 to its subscribe 1. Enter the to system carrie 2. Enter the to on which the 		ns	6 202
N Individual to Be Contacted for Further		D BE CONTACTED IF FURTHER INFORMATI about this statement of account.) Brad Ryan	ON IS NEEDED (Identify an individual to whom	605 852-2224
Information	Address	PO Box 157 (Number, street, rural route, apartment, or suite number Highmore, SD 57345		
	Email	(City, town, state, zip)	Fax (optional)	
O Certification	I, the undersig (Ow (Age X (Of I have examinare true, compilations)	ed, hereby certify that (Check one, <i>but only one</i> , or er other than corporation or partnership) I am f it of owner other than corporation or partnersh line 1 of space B and that the owner is not a corp er or partner) I am an officer (if a corporation) or line 1 of space B. d the statement of account and hereby declare un re, and correct to the best of my knowledge, inform on 1001(1986)] $\underbrace{X /s/F}_{\text{Enter an electror}}$	the owner of the cable system as identified in line 1 of space B nip) I am the duly authorized agent of the owner of the cable sy- soration or partnership; or a partner (if a partnership) of the legal entity identified as own der penalty of law that all statements of fact contained herein nation, and belief, and are made in good faith. Randy Houdek hic signature on the line above to certify this statement. Ising an "/s/ signature" (e.g., /s/ John Smith) dy W. Houdek	vstem as identified
		(Title of official position held in Date:		

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.

SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The determining the total number of subacribers and the gross amounts paid to the captie system for the basic suchers and amounts collected from subacribers nearly and the gross amounts paid to the captie system for the basic suchers and amounts collected from subacribers nearly and the gross amounts paid to the captie system for the basic suchers and amounts collected from subacribers nearly and the gross amounts paid to the capte system for the basic suchers and amounts collected from subacribers nearly and the gross amounts paid to the capte system for the basic suchers and amounts collected from subacribers nearly and the general instructions control to exclude these amounts, see the note on page (vii) of the general instructions for a capte system for the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and list the satellite carrier(s) below. Set S. Enter the total here and li	ounting Period: 2019/1		FORM SA1-2E. PAG
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite home Viewer Act of 1988 amended Trile 17, section 111(9)(1(A), of the Copyright Act by adding the fol: lowing sentence. In deter of providing secondary transmissions of princy breakeds tharsmitters, the system shall not include sub- scribers and amounts collected from subscribers are the note on page (vii) of the general instructions located in the paper SA1-2 form. In determine of additional system scalude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dia owners? IN O	AL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM
The Satellite Home Vewer 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 basis acribers and amounts collected from subscribers and the gross amounts paid to the cable system for the basis carbers and amounts collected from subscribers are ceiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (wil) of the general instructions located in the pager SA1-2 form. Duing the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below. INTEREST ASSESSMENT You must complete this worksheed for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (wii) of the general instructions located in the pager SA1-2 form. Line 1 Enter the amount of late payment or underpayment. Interest Assess Line 2 Multiply line 1 by the interest rate* and enter the sum here *	nture Communications Coop.		636
NO YES. Enter the total here and list the satellite carrier(s) below.	 The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the C lowing sentence: "In determining the total number of subscribers and the gross amounts paid to th service of providing secondary transmissions of primary broadcast transmitters, scribers and amounts collected from subscribers receiving secondary transmissions For more information on when to exclude these amounts, see the note on page (vii) of t located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receiving second seco	Copyright Act by adding the fol- he cable system for the basic the system shall not include sub- ions pursuant to section 119." the general instructions	P Special Statemen Concerning Gross Receipts Exclusio
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Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 - Line 4 Multiply line 3 by 0.00274** and enter here - in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$ * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. * * This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number	For an explanation of interest assessment, see page (viii) of the general instructions loc	cated in the paper SA1-2 form.	×.
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in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 <u>(interest charge)</u> * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served	Line 1 Enter the amount of late payment or underpayment	x x xdays	Interest Assessme
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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.