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

Т

Return completed workbook

STATEM	ENT	OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	by email to:
		ansmissions by	DATE RECEIVED	AMOUNT	-
Cable Syste General instru in the first tab	ctions	are located	2/28/2020	\$ ALLOCATION NUMBER	<u>coplicsoa@loc.gov</u> For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACC	DUNTING PERIOD COVERED	RV THIS STATEMENT: A	(VVV/(Period))	
Accounting Period	ACCI	2019/2	Period 1 = January 1 - June 30 Barcode Data Filing Period (optiona	Period 2 = July 1 - December 31	
В		Instructions: Give the full legal name of the owner of th title of the subsidiary, not that of the pare		bsidiary of another corporation, give the full	corporate
Owner		List any other name or names under whic	h the owner conducts the business o	f the cable system.	
		If there were different owners during the single statement of account and royalty fe		n the last day of the accounting period shoul unting period.	
		Check here if this is the system's first filin	g. If not, enter the system's ID numbe	er assigned by the Licensing Division.	28436
		LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTE	м	
		MEDIACOM MINNESOTA LLC			
		BUSINESS NAME(S) OF OWNER OF	F CABLE SYSTEM (IF DIFFEREN	IT)	
		MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
		ONE MEDIACOM WAY			
		(Number, street, rural route, apartment, or suite no	umber)		
		MEDIACOM PARK, NY 10918 (City, town, state, zip)			
	INSTR		ness or trade names used to id	entify the business and operation of t	he system unless these
C		s already appear in space B. In line		the system, if different from the addre	
System	1	IDENTIFICATION OF CABLE SYSTEM:			
		MEDIACOM MINNESOTA LLC			
		MAILING ADDRESS OF CABLE SYSTEM	:		
	2	1504 Second Street S.E. (Number, street, rural route, apartment, or suite no	umber)		
		Waseca, MN 56093			
		(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 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.

		FORM SA1-2E. PAG
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
	MEDIACOM MINNESOTA LLC	284 em. A "community" is the same as a "community unit" as defined in FCC rul
D	"a separate and distinct community or municipal entity (including ur	nincorporated communities within unincorporated areas and including sing nunity that you list will serve as a form of system identification hereafter kn
		ums, or mobile home parks should be reported in parentheses below the
Area Served	identified city.	
	CITY OR TOWN	STATE
First	Cannon Falls	MN
ommunity	Riverside	MN
	Sunrise Village	MN
ws as Necessary	Blooming Prairie	MN
	W. Concord	MN
	Dodge Center	MN
	Mantorville	MN
	Kenyon	MN
	Brownsdale	MN
	Hayfield	MN
	Waltham	

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM						FORM SA1	
Name	MEDIACOM MINNESOT								2843
	SECONDARY TRANSMISSION		IBSCR		ATES				
E	In General: The information in s					ry transmission	service of	the cable	
	system, that is, the retransmission	on of television	and ra	dio broadcasts	by your sy	ystem to subscri	bers. Give	information	
Secondary	about other services (including p						those exist	ting on the	
Transmission	last day of the accounting period	·				,			
Service: Sub- scribers and	Number of Subscribers: Both	•							
Rates	down by categories of secondar each category by counting the n								
nutoo	separately for the particular serv	•	<i>.</i>	0 , (,	onargou	
	Rate: Give the standard rate of	harged for eac	h categ	gory of service.	Include bo	oth the amount o	of the charg	ge and the	
	unit in which it is generally billed	· ·		,	ny standa	ard rate variation	is within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block				rian of and	andary transmit		as that ashle	
	systems most commonly provide	• •		0		,			
	that applies to your system. Not								
	categories, that person or entity			-		-			
	subscriber who pays extra for ca					d in the count ur	nder "Servi	ce to the	
	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.		e ngin						
	BLC	DCK 1					BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATI	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:								
	Service to first set		919	29.95-51.54					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		2	29.95-51.54					
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SSIONS: RATE	s				
-	In General: Space F calls for ra	te (not subscril	oer) info	ormation with re	spect to a	all your cable sys	stem's serv	vices that were	
F	not covered in space E, that is, t					,	,		
0	service for a single fee. There al		,		0		0.	/	
Services Other Than	furnished at cost or (2) services amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		usualij	y blied. If arry is		harged on a van	abic pei-p	rogram basis,	
ransmissions:	Block 1: Give the standard rate	te charged by t							
Rates	Block 2: List any services that	• •			-	-	•		
	listed in block 1 and for which a	•	·		shed. List	these other ser	vices in the	e form of a	
	brief (two- or three-word) descrip	otion and includ	de the r	ate for each.			T		
		BLO	1					BLOCK 2	
			CATE	GORY OF SER	VICE	RATE	CATEG	DRY OF SERVICE	RATE
	CATEGORY OF SERVICE	RATE	Install		امتغمما				
	Continuing Services:			ation: Non-res	idential		Family	Cablo	80 /
	Continuing Services: • Pay cable	PP	• Mc	ation: Non-res otel, hotel	idential		Family	Cable	80.4
	Continuing Services: • Pay cable • Pay cable—add'l channel		• Mc • Co	ation: Non-res otel, hotel mmercial	idential		Family	Cable	80.4
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	PP	• Mo • Co • Pa	ation: Non-res otel, hotel mmercial y cable			Family	Cable	80.4
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	PP	•Mc •Co •Pa •Pa	ation: Non-res otel, hotel mmercial y cable y cable-add'l ch			Family	Cable	80.4
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	PP PP	• Mo • Co • Pa • Pa • Fir	ation: Non-res otel, hotel mmercial y cable y cable-add'l ch e protection			Family	Cable	80.4
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set	PP PP 99.99	• Mo • Co • Pa • Pa • Fin • Bu	ation: Non-res otel, hotel mmercial y cable y cable-add'l ch e protection rglar protection			Family	Cable	80.4
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	PP PP	• Mo • Co • Pa • Pa • Fin • Bu Other	ation: Non-res otel, hotel mmercial y cable y cable-add'l ch e protection rglar protection services:			Family	Cable	80.4
	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)	PP PP 99.99 15.00-29.00	• Mo • Co • Pa • Pa • Fir • Bu Other • Re	ation: Non-res otel, hotel mmercial y cable y cable-add'l ch e protection rglar protection services: connect		29.00	Family	Cable	80.4
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	PP PP 99.99	• Mc • Co • Pa • Pa • Fir • Bu • Bu • Re • Dis	ation: Non-res otel, hotel mmercial y cable y cable-add'l ch e protection rglar protection services: connect sconnect			Family	Cable	80.4
	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)	PP PP 99.99 15.00-29.00	• Mc • Co • Pa • Pa • Fir • Bu • Bu • Re • Dis	ation: Non-res otel, hotel mmercial y cable y cable-add'l ch e protection rglar protection services: connect		29.00 15.00-29.00	Family	Cable	80.4

	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name	MEDIACOM MINNESO			28
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary Transmitters: Television	In General: In space G, ider carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e) substitute program basis, as Substitute Basis Stations: basis under specific FCC rul • Do <i>not</i> list the station here station was carried <i>only</i> on a • List the station here, and al basis. For further information Column 1: List each station ¹ multicast stream associated "WETA-2" as the same on th Column 2: Give the channel of license. For example, WF Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	ntify every television station (including in during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. With respect to any distant stations ca les, regulations, or authorizations: in space G—but do list it in space I (th a substitute basis. Ilso in space I, if the station was carrier in concerning substitute basis stations, 's call sign. <i>Do not</i> report origination p with a station according to its over-the	bt (1) stations carried only on a part- he carriage of certain network progr 51(e)(2) and $(4))]$; and (2) certain state arried by your cable system on a subtract by sourcable system on a subtract the Special Statement and Program and both on a substitute basis and als , see page (v) of the general instruct program services such as HBO, ES e-air designation. For example, rep evision station for broadcasting over station, an independent station, or (for network multicast), "I" (for indep or "E-M" (for noncommercial educat uctions in the paper SA1-2 form. t the community to which the station	-time basis under rams [sections ations carried on a ubstitute program in Log)—if the so on some other ctions. SPN, etc. Identify each bort multistream er the air in its community a noncommercial pendent), "I-M" tional multicast). in is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KAAL/KAAL (HD) ABC	36	N	Austin, MN
	KAAL-DT2 ThisTv	36.2	I-M	Austin, MN
d Rows as Necessary	KARE/KARE (HD) (NBC)	11	N	Minneapolis MN
-	KARE-DT2 Court TV	11.2	I-M	Minneapolis MN
	KIMT/KIMT (HD) (CBS)	42	N	Mason City, IA
	KIMT-DT2 MyNet	42.2	I-M	Mason City, IA
	KIMT-DT4 Antenna TV	42.4	I-M	Mason City, IA
	KMSP/KMSP (HD) (FOX)	9	I	Minneapolis MN
	KMSP-DT4 BUZZR	9.4	I-M	Minneapolis MN
	KPXM (ION)	40	I	St. Cloud, MN
	KSMQ/KSMQ (HD) (PBS)	20	E	Austin, MN
	KSMQ-DT2 PBS MHz Worldvi	20.2	E-M	Austin, MN
	KSMQ-DT3 PBS Create	20.3	E-M	Austin, MN
	KSMQ-DT4 PBS MN	20.4	E-M	Austin, MN
	KSTC/KSTC(HD) IND	45	I	Minneapolis, MN
	KSTC-DT2 MeTV	45.2	I-M	Minneapolis, MN
	KSTC-DT3 Antenna	45.3	I-M	Minneapolis, MN
	KSTC-DT4 ThisTV	45.4	I-M	Minneapolis, MN
	KSTP/KSTP(HD) ABC	35	N	St. Paul, MN
	KSTP-DT2 Heroes and Icons	35.2	I-M	St. Paul, MN
	KTCA-DT PBS TPT 2 /KTCA F	34	E	St Paul MN
	KTCA-DT2 PBS Kids 24/7 (HE	34.2	E-M	St Paul MN
	KTCA-DT2 PBS Kids 24/7 (HE KTCA-DT3 PBS TPT NOW HD		E-M E-M	St Paul MN St Paul MN

	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEI
Name	MEDIACOM MINNESC	TA LLC		20
	PRIMARY TRANSMITTERS:	TELEVISION		
G	•	ntify every television station (including	•	,
U		n during the accounting period, <i>excep</i> n effect on June 24, 1981, permitting t		
Primary	76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.		
ransmitters: Television		explained in the next paragraph. With respect to any distant stations of	arried by your cable system on a sub	ostitute program
		les, regulations, or authorizations: in space G—but do list it in space I (the Special Statement and Dragram I	
	station was carried only on		ine Special Statement and Program	
		Iso in space I, if the station was carrien n concerning substitute basis stations		
		's call sign. <i>Do not</i> report origination		
	multicast stream associated "WETA-2" as the same on t	with a station according to its over-th	e-air designation. For example, repo	rt multistream
		I number the FCC assigned to the tel	evision station for broadcasting over	the air in its community
		RC is channel 4 in Washington, D.C. case whether the station is a network	station an independent station or a	noncommercial
		ring the letter "N" (for network), "N-M"	•	
		"E" (for noncommercial educational), rms, see page (iv) of the general instr		onal multicast).
		n of each station. For U.S. stations, lis		is licensed by the
	FCC. For Mexican or Canac	lian stations, if any, give the name of	the community with which the station	is identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	КТТС СШ НД	10.1	I-M	Rochester MN
	KTTC/KTTC (HD) (NBC)	10	N	Rochester MN
	KTTC-DT2 (CW)	10.2	I-M	Rochester MN
	KTTC-DT3 Heroes and Icons	10.3	I-M	Rochester MN
	KTTC-DT3 Heroes and Icons KTTC-DT4 Court TV	10.3 10.4	I-M I-M	
				Rochester MN
	KTTC-DT4 Court TV KTTC-DT5 Justice Network	10.4 10.5	I-M	Rochester MN Rochester MN Rochester MN
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX)	10.4 10.5 46	i-M i-M i	Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV	10.4 10.5 46 46.2	I-M I-M I I	Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY ROCHESTER,MN MASON CITY
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV KXLT-DT3 Laff	10.4 10.5 46 46.2 46.3	I-M I-M I I-M I-M	Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY ROCHESTER,MN MASON CITY ROCHESTER,MN MASON CITY
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV	10.4 10.5 46 46.2	I-M I-M I I	Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY ROCHESTER,MN MASON CITY
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV KXLT-DT3 Laff	10.4 10.5 46 46.2 46.3	I-M I-M I I-M I-M	Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY ROCHESTER,MN MASON CITY ROCHESTER,MN MASON CITY
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV KXLT-DT3 Laff KXLT-DT4 Escape	10.4 10.5 46 46.2 46.3 46.4	I-M I-M I I I-M I-M I-M	Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY ROCHESTER,MN MASON CITY ROCHESTER,MN MASON CITY
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV KXLT-DT3 Laff KXLT-DT4 Escape KXLT-DT5 Quest	10.4 10.5 46 46.2 46.3 46.4 46.5	I-M I-M I I I-M I-M I-M I-M	Rochester MN Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV KXLT-DT3 Laff KXLT-DT4 Escape KXLT-DT5 Quest KYIN (PBS)	10.4 10.5 46 46.2 46.3 46.3 46.4 46.5 18	I-M I-M I-M I-M I-M I-M I-M E	Rochester MN Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV KXLT-DT3 Laff KXLT-DT4 Escape KXLT-DT5 Quest KYIN (PBS) WCCO/WCCO (HD) (CBS)	10.4 10.5 46 46.2 46.3 46.4 46.5 18 32	I-M I-M I I I-M I-M I-M I-M I-M I I M I I M	Rochester MN Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY MINNEapolis MN
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV KXLT-DT3 Laff KXLT-DT4 Escape KXLT-DT5 Quest KYIN (PBS) WCCO/WCCO (HD) (CBS) WCCO-DT2 Start TV	10.4 10.5 46 46.2 46.3 46.3 46.4 46.5 18 32 32.2	I-M I-M I I I-M I-M I-M I-M I-M I-M	Rochester MN Rochester MN Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY Minneapolis MN Minneapolis MN
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV KXLT-DT3 Laff KXLT-DT4 Escape KXLT-DT5 Quest KYIN (PBS) WCCO/WCCO (HD) (CBS) WCCO-DT2 Start TV WCCO-DT3 DABL	10.4 10.5 46 46.2 46.3 46.3 46.4 46.5 18 32 32.3 32.3	I-M I-M I I I-M I-M I-M E E N I-M I-M I-M	Rochester MN Rochester MN Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY Minneapolis MN Minneapolis MN Minneapolis MN
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV KXLT-DT3 Laff KXLT-DT4 Escape KXLT-DT5 Quest KYIN (PBS) WCCO/WCCO (HD) (CBS) WCCO-DT2 Start TV WCCO-DT3 DABL WFTC/WFTC (HD) (MyNET)	10.4 10.5 46 46.2 46.3 46.4 46.5 18 32 32.2 32.2 32.3 29	I-M I-M I I I-M I-M I-M I-M I-M	Rochester MN Rochester,MN MASON CITY Mochester,MN MASON CITY Monneapolis MN Minneapolis MN Minneapolis MN
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV KXLT-DT3 Laff KXLT-DT4 Escape KXLT-DT5 Quest KYIN (PBS) WCCO-WCCO (HD) (CBS) WCCO-DT2 Start TV WCCO-DT3 DABL WFTC/WFTC (HD) (MyNET) WFTC-DT4 Movies	10.4 10.5 46 46.2 46.3 46.4 46.5 18 32 32.3 32.3 29 29.4	I-M I-M I I I I-M I-M I-M E E N I-M I-M I I I I I I I I I I I I I I I I	Rochester MN Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY Minneapolis MN Minneapolis MN Minneapolis MN Minneapolis MN Minneapolis MN
	KTTC-DT4 Court TV KTTC-DT5 Justice Network KXLT/KXLT (HD) (FOX) KXLT-DT2 MeTV KXLT-DT3 Laff KXLT-DT4 Escape KXLT-DT5 Quest KYIN (PBS) WCCO/WCCO (HD) (CBS) WCCO-DT2 Start TV WCCO-DT3 DABL WFTC/WFTC (HD) (MyNET) WFTC-DT4 Movies WHLA PBS	10.4 10.5 46 46.2 46.3 46.3 46.4 46.5 18 32 32.2 32.2 32.3 29 29.4 29.4 30	I-M I-M I I I I-M I-M I-M E E N I-M I I I I I I I E	Rochester MN Rochester MN Rochester MN Rochester MN Rochester MN ROCHESTER,MN MASON CITY Monneapolis MN Minneapolis MN Minneapolis MN Minneapolis MN La Crosse, WI

EGAL NAME OF								SYSTEM 284
	every radio s	tation ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of i for detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: If ignal, indicate Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be receint t the Co sign of the he static ion's sign g a chech n's locati	I-Band FM Carriage: Under C stem whenever it is received a ived at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the	t the system's he system's FM ante his point, see pa ed by the cable s e station is licens	adend, and (2 enna, during c ge (v) of the g ystem as a se sed by the FC) it can ertain st eneral ir eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
			the community with which the			0/5		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
				 		·		

	od: 2019/2						FOR	M SA1-2E. PAGE 5.
Nomo	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	MEDIACOM MINNESO	TA LLC						28436
					0			
1	SUBSTITUTE CARRIAG	-	-					
•	In General: In space I, ident substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN				0		• •	
Special	 During the accounting per 	-			sis. anv nonr	network tel	evision prod	aram
Statement and Program Log	broadcast by a distant sta	-	,	,	, ,	Γ	YES	
Program Log	-					L	-	
	Note: If your answer is "No	o", leave the	e rest of this pa	ige blank. If your answer is	s "Yes," you r	must comp	lete the pro	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI							
	In General: List each subs clear. If you need more spa				s wherever p	ossidie, it t	neir meanir	ig is
				vision program ("substitute	e program") ti	hat. during	the accoun	tina
	period, was broadcast by a	distant sta	tion and that y	our cable system substitut	ed for the pro	ogramming	g of another	station
	under certain FCC rules, re							
	Do not use general categor		ovies" or "bask	etball." List specific progra	im titles, for e	example, "l	Love Lucy'	' or
	"NBA Basketball: 76ers vs.		dcast live ent	er "Yes." Otherwise enter '	'No "			
				asting the substitute progr				
	Column 4: Give the broa	adcast stati	on's location (the community to which th	e station is lie		the FCC or	, in
	the case of Mexican or Car							
			when your sy	stem carried the substitute	e program. U	se numera	ls, with the	month
	first. Example: for May 7 gi		e substitute pr	ogram was carried by you	r cahle syste	m listthe	times accu	rately
	to the nearest five minutes.							
	stated as "6:00-6:30 p.m."				•			
				n was substituted for prog				
	to delete under FCC rules							rogram
	was substituted for programe ffect on October 19, 1976		your system w	as permitted to delete und	er FCC rules	s and regul	ations in	
					-			-
					WHE	N SUBST	ITUTE	
	s	UBSTITUT	E PROGRAM	1		AGE OCC	URRED	
	S	2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		7. REASON FOR DELETION
				4. STATION'S LOCATION	CARRI	AGE OCC	URRED	
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		7. REASON FOR DELETION
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCC		

Accounting Period:	2019/2			FORM	6A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM MINNESOTA LLC			Ş	8YSTEM ID# 28436
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and all amounts (gross receipts) paid to your cable system by subscribers for the sys (as identified in space E) during the accounting period. For a further explanation 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	stem's see	condary transmi compute this a	ission service amount, see \$ 24	
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 bu • Use block 3 if the amount of gross receipts in space K is more than \$263,800 bu See page (vi) of the general instructions located in the paper SA1-2 form for more infor BLOCK 1: GROSS RECEIPTS OF \$137,17	ut less tha ormation.	n \$527,600	263,800	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty f accounting period is \$52.00	tee that yo	ou must pay for t	inis six-mon	
	Line 1. Royalty fee for accounting period				
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add line:	es 1 and 2			
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS			-	
	1. Base amount under statutory formula	\$	263,800.00		
	2. Enter amount of gross receipts from space K	\$	249,190.82		
	3. Subtract line 2 from line 1	\$	14,609.18		
	Enter the amount of gross receipts from space K			49,190.82	
	5. Enter the amount from line 3			14,609.18	
	6. Subtract line 5 from line 4			34,581.64	
	7. Multiply line 6 by .005 (enter figure here)				1,172.91
	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 ar	and 8	·····	\$	1,172.91
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,8	300 (but l	ess than \$527,	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				
	 Kiulupi line 5 by .01 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				
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5	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)		\$	1,172.91	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)		\$	20.00	7
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	1,192.91
	Important: Your remittance must be in the form of an electronic payme See page i of the general instructions in the paper SA1-2		-		ghts!

Accounting Period:	2019/2		FORM SA1-2E. PAGE 7
Name		F OWNER OF CABLE SYSTEM: MINNESOTA LLC	SYSTEM ID# 28436
M Channels	 to its subscribe 1. Enter the tot system carrie 2. Enter the tot on which the 	You must give (1) the number of channels on which the cable system carried television broadcast stations ers, and (2) the cable system's total number of activated channels during the accounting period. tal number of channels on which the cable ed television broadcast stations	58
N Individual to Be Contacted		TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom about this statement of account.)	
for Further Information	Name	Kenneth J. Kohrs Telephone 84	45-443-2762
	Address	One Mediacom Way (Number, street, rural route, apartment, or suite number) Mediacom Park, NY 10918 (City, town, state, zip)	
	Email	Copyrights@mediacomcc.com Fax (optional)	
O Certification	I, the undersig (Own X (Age i (off i i I have examin are true, compl	(This statement of account must be certified and signed in accordance with Copyright Office regulations) gned, hereby certify that (Check one, <i>but only one</i> , of the boxes.) (Iner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; (Inter of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership) of the legal entity identified as owne in line 1 of space B. Here the statement of account and hereby declare under penalty of law that all statements of fact contained herein lete, and correct to the best of my knowledge, information, and belief, and are made in good faith. (Inter of 1001(1986)] X /s/ Kenneth J. Kohrs	stem as identified
		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: Kenneth J. Kohrs Title: Vice President, Financial Reporting (Title of official position held in corporation or partnership)	
		Date: 2/18/2020	

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.

unting Period: 2019/2	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
DIACOM MINNESOTA LLC	2843
 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." 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 transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below. 	P Special Statement Concerning Gross Receipts Exclusion
Name Name Mailing Address Mailing Address	
INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	0
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	Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
x	Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
x	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
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Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here - x	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here - x - x - x - x - x - x - x - x - x - x - x - 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 \$ x - (interest charge) * 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@loc.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.	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
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