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
STATEME	ENT OF ACCOUNT	FOR COPYRIGH	HT OFFICE USE ONLY	by email to:
	ry Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.gov
Cable Syste	ems (Short Form)		\$	For additional information, contact the U.S. Copyright
	ctions are located	08/28/20		Office Licensing Division at:
in the first tab	of this workbook		ALLOCATION NUMBER	Tel: (202) 707-8150
A Accounting Period	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y Period 1 = January 1 - June 30 Barcode Data Filing Period (optional	Period 2 = July 1 - December 31	
B Owner	Instructions: Give the full legal name of the owner of t title of the subsidiary, not that of the pare List any other name or names under whic	ent corporation.	sidiary of another corporation, give the full co the cable system.	rporate
		accounting period, only the owner on	the last day of the accounting period should s	
	Charly have if this is the sustain /s first fills	- If a stand the sustain (s ID such a		24289

Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.

		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		MEDIACOM SOUTHEAST LLC (ZEIGLER, IL)
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		ONE MEDIACOM WAY
		(Number, street, rural route, apartment, or suite number)
		MEDIACOM PARK, NY 10918
		(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 unless these s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B
system		IDENTIFICATION OF CABLE SYSTEM:
	1	

MAILING ADDRESS OF CABLE SYSTEM: 90 NORTH MAIN 2 (Number, street, rural route, apartment, or suite number) BENTON, KY 42025

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

(City, town, state, zip code)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAG
Name		
	MEDIACOM SOUTHEAST LLC (ZEIGLER, IL)	242
D	Instructions: List each separate community served by the cable system. A "commun" a separate and distinct community or municipal entity (including unincorporated c discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you as the "first community." Please use it as the first community on all future filings.	ommunities within unincorporated areas and including single
	Note: Entities and properties such as hotels, apartments, condominiums, or mobile	home parks should be reported in parentheses below the
Area Served	identified city.	
	CITY OR TOWN	STATE
First	ZEIGLER	IL I
Community	BUSH	IL
	CAMBRIA	IL
dd Rows as Necessary	DOWELL	IL
ad nows as necessary	ELKVILLE	
	FRANKLIN CO.	IL .
	HURST	IL
	JACKSON CO.	IL
	PERRY CO.	IL
	ROYALTON	IL
	WILLIAMSON CO.	IL
	MOUNDS	IL
	MOUND CITY	L
	ALTO PASS	IL.
	COBDEN	IL
	Union County	IL

								FORM SA1			
Name	LEGAL NAME OF OWNER OF C							515	TEM ID 2428		
	MEDIACOM SOUTHEAS	ST LLC (ZEI	GLER	., IL)					2720		
-	SECONDARY TRANSMISSION	I SERVICE: SU	JBSCR	IBERS AND R	ATES						
E	In General: The information in s										
Secondary	system, that is, the retransmission about other services (including provide the services)										
Transmission	last day of the accounting period										
Service: Sub-	Number of Subscribers: Bot						ble system	n, broken			
scribers and	down by categories of secondar										
Rates	each category by counting the n separately for the particular serv	•		0,0			,	s charged			
	Rate: Give the standard rate of							ge and the			
	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. Not										
	categories, that person or entity			-		-					
	subscriber who pays extra for ca					d in the count u	nder "Servi	ce to the			
	first set" and would be counted o	0			· · ·		differenti	from the ope			
	Block 2: If your cable system printed in block 1 (for example, t	-		-							
	with the number of subscribers a										
	sufficient.		Ū			•					
	BLO	OCK 1 NO. OF	:				BLOCK	C2 NO. OF	<u> </u>		
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CAT	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT		
	Residential:										
	 Service to first set 		975	29.95-61.54							
	 Service to additional set(s) 										
	 FM radio (if separate rate) 										
	Motel, hotel										
	Commercial		1	29.95-61.54							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC				s						
-	In General: Space F calls for ra					all your cable sys	stem's serv	vices that were			
F	not covered in space E, that is, t	those services	that are	not offered in	combinati	on with any sec	ondary trar	nsmission			
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		usually	blice. If any fe			abic pei-p	rogram basis,			
ransmissions:	Block 1: Give the standard rate										
Rates	Block 2: List any services that	• •			-	-					
	listed in block 1 and for which a brief (two- or three-word) descript				shed. List	these other ser	vices in the	e form of a			
	CATEGORY OF SERVICE	BLO	-	GORY OF SER		DATE	CATEC	BLOCK 2 DRY OF SERVICE	DAT		
	Continuing Services:	RATE	-	ation: Non-res	-	RATE	CATEG	JRT OF SERVICE	RATE		
	• Pay cable	PP		tel, hotel			Family	Cable	83.9		
	Pay cable—add'l channel	PP		mmercial							
	Fire protection		_	y cable							
	•Burglar protection			y cable-add'l ch	annel						
	Installation: Residential			e protection							
	• First set	99.99		glar protection							
				•							
		15.00-49.00					I				
	 Additional set(s) 	15.00-49.00				49.00					
			•Re	connect		49.00					
	• Additional set(s) • FM radio (if separate rate)	15.00-49.00 10.50	• Re • Dis	connect connect							
	• Additional set(s) • FM radio (if separate rate)		• Re • Dis • Ou	connect	855	49.00 15.00-49.00					

	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name		AST LLC (ZEIGLER, IL)		242
G Primary ansmitters: Television	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 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 information Column 1: List each station 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	Iso in space I, if the station was carrie n concerning substitute basis stations 's call sign. <i>Do not</i> report origination with a station according to its over-th	t (1) stations carried only on a part-the carriage of certain network progra 51(e)(2) and (4))]; and (2) certain state arried by your cable system on a sub- the Special Statement and Program ed both on a substitute basis and also , see page (v) of the general instruct program services such as HBO, ESF e-air designation. For example, repo- evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indep- or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station	time basis under ams [sections tions carried on a bstitute program Log)—if the o on some other ions. PN, etc. Identify each ort multistream the air in its community a noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KBSI/KBSI(HD) FOX	22	I	CAPE GIRARDEAU, MO
	KBSI-DT3 Comet	22.3	I-M	CAPE GIRARDEAU, MO
vs as Necessary	KETC PBS	39	E	ST LOUIS, MO
	KFVS/KFVS(HD) CBS	12	N	CAPE GIRARDEAU, MO
	KFVS-DT2/KFVS-DT2 (HD) CV	12.2	I-M	CAPE GIRARDEAU, MO
	KFVS-DT3 Circle	12.3	I-M	CAPE GIRARDEAU, MO
	KFVS-DT4 MeTV	12.4	I-M	CAPE GIRARDEAU, MO
	KFVS-DT5 Grit	12.5	I-M	CAPE GIRARDEAU, MO
	WDKA/WDKA (HD) MyNET	49		PADUCAH, KY
	WDKA-DT2 Charge	49.2	I-M	PADUCAH, KY
	WDKA-DT3 TBD	49.3	I-M	PADUCAH, KY
	WDKA-DT4 Stadium HD	49.4	I-M	PADUCAH, KY
	WPSD/WPSD(HD) NBC		N	PADUCAH, KY
	WPSD-DT2 This TV	32.2	I-M	PADUCAH, KY
	WPSD-DT3 Antenna TV	32.3	I-M	PADUCAH, KY
	WISE-DIS Alterna TV	34	N	HARRISBURG, IL
		34.2	I-M	
	WSIL-DT2 H&I			
	WSIL-DT3 Justice Network	34.3	I-M	
		34.4	I-M	
	WSIU/WSIU (HD) PBS	8	E	CARBONDALE, IL
	WSIU-DT2 PBS WORLD	8.2	E-M E-M	CARBONDALE, IL CARBONDALE, IL
	WSIU-DT3 PBS CREATE	17	 	CARBONDALE, IL

Accounting Period:	2020/1			FORM SA1-2E. PAGE 3			
Neme	LEGAL NAME OF OWNER OF CABLE SY	/STEM:		SYSTEM ID:			
Name	MEDIACOM SOUTHEAST LLC	(ZEIGLER, IL)		24289			
	PRIMARY TRANSMITTERS: TELEVISIO	DN .					
G	carried by your cable system during th	ne accounting period, except	y translator stations and low power tele of (1) stations carried only on a part-tin the carriage of certain network program	ne basis under			
Primary Transmitters: Television	76.59(d)(2) and (4), 76.61(e)(2) and (4) substitute program basis, as explained	4), or 76.63 (referring to 76. d in the next paragraph.	61(e)(2) and (4))]; and (2) certain static	ons carried on a			
Television	 Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 						
	List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other						
	basis. For further information concerning substitute basis stations, see page (v) of the general instructions.						
	Column 1: List each station's call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream						
	"WETA-2" as the same on the form.						
	Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community						
	of license. For example, WRC is channel 4 in Washington, D.C.						
	Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M"						
	(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).						
	For the meaning of these terms, see p						
			t the community to which the station is				
	FCC. For Mexican or Canadian station	ns, if any, give the name of	the community with which the station is	s identified.			
	1. CALL SIGN 2. B'CA	ST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION			

MEDIACOM	FOWNER OF (C (ZEIGLER, IL)				Į	SYSTEM 242
n General: Lis		station ca	arried on a separate and discre nerally receivable by your cab					н
eccivable if (1 on the basis of For detailed int paper SA1-2 for Column 1: I Column 2: \$ Column 3: I idgnal, indicate Column 4: () it is carried by monitoring, to formation about orm. dentify the call State whether t f the radio stat e this by placing Give the statior	y the sys be recein the Co sign of e the static ion's sign g a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received at ved 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 the community with 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 ii eparate a	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
	+							
	+							
	+							
							·	

-	od: 2020/1							FORM	/I SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYST	TEM:						SYSTEM ID#
Name	MEDIACOM SOUTHEA	AST LLC (Z	ZEIGLER, II	_)					24289
	SUBSTITUTE CARRIAG	E: SPECIA	L STATEME	NT AND PROGRAM LO	G				
	In General: In space I, ident	tify every non	nnetwork televi	<i>ision program,</i> broadcast by	/ a distant sta	tion, that y	our	cable syst	tem carried on a
	substitute basis during the a								
Substitute	explanation of the programm	ning that mus	st be included	in this log, see page (v) of t	he general in:	structions	in th	e paper S	A1-2 form.
Carriage:	1. SPECIAL STATEMEN	T CONCER	NING SUBS	TITUTE CARRIAGE					
Special Statement and	 During the accounting per 	riod, did you	ır cable syster	n carry, on a substitute ba	sis, any noni	network te	levis	sion prog	ram
Program Log	broadcast by a distant sta	ition?						YES	× NO
	Note: If your answer is "No	" leave the	rest of this na	ae blank. If your answer is		must com	nlote	-	
	-	, leave the	rest of this pa	ige blank. If your answer is	s res, your	nust com	piete	e the prog	Ian
	log in block 2.		MC						
	2. LOG OF SUBSTITUTE In General: List each subs			ate line. Use abbreviation	s wherever n	ossible if	thai	r meaning	n ie
	clear. If you need more spa				s wherever p		uiei	rmeaning	J 15
				vision program ("substitute	e program") t	hat, during	g the	e accounti	ing
	period, was broadcast by a	i distant stati	ion and that y	our cable system substitut	ed for the pro	ogrammin	g of	another s	station
	under certain FCC rules, re								
	Do not use general categor		vies" or "bask	etball." List specific progra	am titles, for e	example, '	'I Lo	ve Lucy"	or
	"NBA Basketball: 76ers vs.		dcast live ent	er "Yes." Otherwise enter '	"No "				
				asting the substitute progr					
				the community to which th		censed by	the	FCC or,	in
	the case of Mexican or Car								
			when your sy	stem carried the substitute	e program. U	se numera	als, v	with the m	nonth
	first. Example: for May 7 gi			arram was carried by you	r aabla avata	m lietth.		~~ ~~~	atob.
	to the nearest five minutes.			ogram was carried by you ried by a system from 6:01					atery
	stated as "6:00-6:30 p.m."	. Example: a	a program oan						
		ter "R" if the	listed program	n was substituted for prog	ramming that	t your sys	tem	was requ	ired
	to delete under FCC rules a	and regulation	ons in effect d	uring the accounting perio	d; enter the	letter "P" i		listed pro	ogram
	was substituted for program	nming that y				s and regu	latic		
	was substituted for program effect on October 19, 1976	nming that y				s and regu	Ilatic		
		nming that y			ler FCC rules	-		ons in	[
	effect on October 19, 1976	nming that y	/our system w	as permitted to delete und	ler FCC rules WHE		TITU	ons in	7. REASON FOR
	effect on October 19, 1976	UBSTITUTE	our system w	as permitted to delete und	ler FCC rules WHE CARRI	N SUBST	TITU	ITE RRED	7. REASON FOR DELETION
	effect on October 19, 1976	UBSTITUTE	/our system w	as permitted to delete und	ler FCC rules WHE	N SUBST	TITU CUF	ITE RRED	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	7. REASON FOR DELETION
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
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	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
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	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	
	effect on October 19, 1976	UBSTITUTE	our system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBS AGE OC		ITE RRED ES	

Accounting Period:	2020/1			FORM S	A1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM SOUTHEAST LLC (ZEIGLER, IL)			S	YSTEM ID# 24289
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 sy (as identified in space E) during the accounting period. For a further explanatio 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	ystem's se n of how to	condary transm o compute this a	ission service amount, see	8,520.24 oss receipts)
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 b Use block 3 if the amount of gross receipts in space K is more than \$263,800 b See page (vi) of the general instructions located in the paper SA1-2 form for more in	out less that	an \$527,600	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137	,100 OR I	ESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty accounting period is \$52.00	y fee that y	ou must pay for	this 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 lin				
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES				
	1. Base amount under statutory formula		263,800.00	,	
	2. Enter amount of gross receipts from space K	\$	218,520.24		
	3. Subtract line 2 from line 1	\$	45,279.76		
	4. Enter the amount of gross receipts from space K		\$	218,520.24	
	5. Enter the amount from line 3		. \$	45,279.76	
	6. Subtract line 5 from line 4		\$	173,240.48	
	7. Multiply line 6 by .005 (enter figure here)			\$	866.20
	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		\$	866.20
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263	,800 (but l	less than \$527	,600)	
	1. Enter the amount of gross receipts from space K				
	2. Base amount under statutory formula				
	3. Subtract line 2 from line 1		•		
	4. Multiply line 3 by .01				
	 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) 			1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8				
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4,	, 5, and 6 .			
	FILING FEE AND TOTAL REMITTANCE DU	E			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	866.20	
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			\$	886.20
	Important: Your remittance must be in the form of an electronic payn See page i of the general instructions in the paper SA1		-		hts!

Accounting Period:	2020/1			FORM SA1-2E. PAGE 7
Name		WNER OF CABLE SYSTEM: DUTHEAST LLC (ZEIGLER	а, IL)	SYSTEM ID# 24289
M Channels	to its subscribers, 1. Enter the total system carried t 2. Enter the total	, and (2) the cable system's to number of channels on which		30
		-		73
N Individual to Be Contacted	we can contact al	BE CONTACTED IF FURTHI bout this statement of accoun Kenneth J. Kohrs		have 945 442 2762
for Further Information	Name	Keimeth J. Koins	Тенр	hone 845-443-2762
	Address	One Mediacom Way (Number, street, rural route, apartm		
		Mediacom Park, NY		
		(City, town, state, zip)		
	Email	Copyrights@me	ediacomcc.com Fax (optional)	
O Certification	I, the undersigne (Owner X (Agent in li (Office in li I have examined	id, hereby certify that (Check o r other than corporation or p of owner other than corpora ne 1 of space B and that the or er or partner) I am an officer (i ne 1 of space B. the statement of account and b, and correct to the best of my	ust be certified and signed in accordance with Copyright Office regulat ne, <i>but only one</i> , of the boxes.) artnership) I am the owner of the cable system as identified in line 1 of s tion or partnership) I am the duly authorized agent of the owner of the wner is not a corporation or partnership; or f a corporation) or a partner (if a partnership) of the legal entity identified hereby declare under penalty of law that all statements of fact contained knowledge, information, and belief, and are made in good faith. X /s/ Kenneth J. Kohrs Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	space B; or cable system as identified as owner of the cable system
		Typed or printed Title: (Title of of	name: Kenneth J. Kohrs Vice President, Financial Reporting ficial position held in corporation or partnership)	
		Date:	8/11/2020	

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: 2020/1	FORM SA1-2E. PAG
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
DIACOM SOUTHEAST LLC (ZEIGLER, IL)	242
 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? NO 	P Special Statemer Concerning Gros Receipts Exclusio
YES. Enter the total here and list the satellite carrier(s) below	
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. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
^	_
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
x	_
Line 3 Multiply line 2 by the number of days late and enter the sum here - - 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 days 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	-
x	-
Line 3 Multiply line 2 by the number of days late and enter the sum here	
x	
x	
x	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
x	

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