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	T OFFICE USE ONLY	by email to:
for Seconda	ry Tra	ansmissions by	DATE RECEIVED	AMOUNT	
Cable Syste General instru- in the first tab	ctions	Short Form) are located	08/06/2020	\$ ALLOCATION NUMBER	coplicsoa@loc.gov For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACCO	DUNTING PERIOD COVERED E	BY THIS STATEMENT: (YY	YY/(Period))	
		2020/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		20201	Barcode Data Filing Period (optional -	see instructions)	
Accounting Period					
В		Instructions: Give the full legal name of the owner of the of the subsidiary, not that of the parent co		iary of another corporation, give the full cor	porate title
Owner		List any other name or names under which	the owner conducts the business of the	e cable system.	
		If there were different owners during the a single statement of account and royalty fee		e last day of the accounting period should s ng period.	ubmit a
		Check here if this is the system's first filing.	. If not, enter the system's ID number as	ssigned by the Licensing Division.	31293
		LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM		
		Dumont Telephone Company			
		BUSINESS NAME(S) OF OWNER OF	CABLE STSTEM (IF DIFFERENT)		
		MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
		PO Box 349 (Number, street, rural route, apartment, or suite nu	mber)		
		Dumont, IA 50625-0349 (City, town, state, zip)			
С		RUCTIONS: In line 1, give any busine s already appear in space B. In line 2			
System	1	IDENTIFICATION OF CABLE SYSTEM:			
		MAILING ADDRESS OF CABLE SYSTEM:			
	2	(Number, street, rural route, apartment, or suite nu	imber)		
		(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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID:
Name	Dumont Telephone Company	31293
D	Instructions: List each separate community served by the cable system. A "commu "a separate and distinct community or municipal entity (including unincorporated 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.	nity" is the same as a "community unit" as defined in FCC rules: communities within unincorporated areas and including single,
	Note: Entities and properties such as hotels, apartments, condominiums, or mobile	home narks should be reported in parentheses below the
Area Served	identified city.	nome parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	Dumont	IA
Community	Allison	IA
	Parkersburg	IA
ld Rows as Necessary	Geneva	IA

	LEGAL NAME OF OWNER OF C	ABIE SVSTEM						FORM SA1	TEM ID
Name	Dumont Telephone Cor							515	3129
Е	SECONDARY TRANSMISSION						aamilaa af f		
-	In General: The information in system, that is, the retransmissi								
Secondary	about other services (including								
Transmission	last day of the accounting period								
Service: Sub- scribers and	Number of Subscribers: Bot	•					,	·	
Rates	down by categories of secondar each category by counting the n			•		•			
	separately for the particular serv	vice at the rate in	ndicate	ed—not the nur	nber of se	ts receiving ser	vice).	Ū.	
	Rate: Give the standard rate of	-						•	
	unit in which it is generally billed category, but do not include disc	• •		,	iny standa	ird rate variation	is within a j	Darticular rate	
	Block 1: In the left-hand block				ries of sec	ondary transmi	ssion servio	ce that cable	
	systems most commonly provid								
	that applies to your system. Not categories, that person or entity			0		0			
	subscriber who pays extra for ca					• •	•		
	first set" and would be counted	once again unde	er "Ser	vice to addition	al set(s)."				
	Block 2: If your cable system	•							
	printed in block 1 (for example, the number of subscribers and the					,		, 0	
	sufficient.		iigiit						
	BL	OCK 1					BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIBEI	RS	RATE	CATE	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RATE
	Residential:								
	 Service to first set 	Basic Pkg = 2	289	\$120.60/mth	Local E	al Basic Pkg			\$43.35
	 Service to additional set(s) 	Non-DVR = 1	38	\$3.95/mth	Basic F	^p kg (Geneva)	5	\$118.6
	 FM radio (if separate rate) 				Local E	Basic Pkg (G	ieneva)	1	\$41.4
	Motel, hotel	Basic Pkg =		\$240.00/mth		onal DVR		2	\$5.95
	Commercial	Basic Pkg =	1	\$124.00/mth		ercial - Basi		1	\$170.
	Converter				Comme	ercial - Basi	с Ркд	1	\$320.
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRAN	NSMIS	SSIONS: RATE	s				
F	In General: Space F calls for ra		,		•	• •			
•	not covered in space E, that is, the service for a single fee. There a								
Services	furnished at cost or (2) services	•			0		0.07		
Other Than	amount of the charge and the u		usually	y billed. If any ra	ates are ch	narged on a var	iable per-p	ogram basis,	
Secondary Transmissions:	enter only the letters "PP" in the Block 1: Give the standard ra		e cab	le system for e	och of the	applicable servi	ices listed		
Rates	Block 2: List any services that							were not	
Rales	-	separate charge			iahad Liat	these other ser	vices in the	e form of a	
Rales	listed in block 1 and for which a				sneu. List				
Rales	listed in block 1 and for which a brief (two- or three-word) description	ption and include	e the r		ISHEU. LISI				
Rales		ption and include			sned. List			BLOCK 2	
Rales	brief (two- or three-word) descri	BLOC RATE C	K 1 CATE	rate for each. GORY OF SER	VICE	RATE	CATEGO	BLOCK 2 DRY OF SERVICE	RATE
Rales	brief (two- or three-word) description CATEGORY OF SERVICE Continuing Services:	BLOC RATE C	K 1 CATE nstall	rate for each. GORY OF SER ation: Non-res	VICE	RATE		DRY OF SERVICE	
Rales	brief (two- or three-word) description CATEGORY OF SERVICE Continuing Services: • Pay cable	BLOC RATE C \$14.95	K 1 CATE nstall • Mo	ate for each. GORY OF SER ation: Non-res	VICE	RATE	NFL Re	DRY OF SERVICE	\$40.0
Rales	brief (two- or three-word) description CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	BLOC RATE C	K 1 CATE nstall • Mo • Co	ate for each. GORY OF SER ation: Non-res otel, hotel ommercial	VICE	RATE PP PP	NFL Re	DRY OF SERVICE	\$40.0
Kales	brief (two- or three-word) description CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	BLOC RATE C \$14.95	K 1 CATE nstall • Mo • Co • Pa	ate for each. GORY OF SER ation: Non-res otel, hotel ommercial y cable	VICE	RATE PP PP \$10	NFL Re	DRY OF SERVICE	\$40.0
Rales	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection	BLOC RATE C \$14.95	K 1 CATE • Mc • Co • Pa • Pa	ate for each. GORY OF SER ation: Non-res otel, hotel mmercial y cable y cable-add'l ch	VICE	RATE PP PP	NFL Re	DRY OF SERVICE	
Rales	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	BLOC RATE C \$14.95 \$14.95	K 1 CATE(nstall • Mc • Co • Pa • Pa • Fir	ate for each. GORY OF SER ation: Non-res otel, hotel mmercial y cable y cable-add'l ch e protection	VICE idential	RATE PP PP \$10	NFL Re	DRY OF SERVICE	\$40.0
Kales	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection	BLOC RATE C \$14.95 \$14.95 \$35.00	K 1 CATE nstall • Mo • Co • Pa • Pa • Fir • Bu	ate for each. GORY OF SER ation: Non-res otel, hotel mmercial y cable y cable-add'l ch	VICE idential	RATE PP PP \$10	NFL Re	DRY OF SERVICE	\$40.0
Kales	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	BLOC RATE C \$14.95 \$14.95 \$35.00	K 1 CATE nstall • Mo • Co • Pa • Pa • Fir • Bu Other	GORY OF SER ation: Non-res otel, hotel ommercial y cable y cable-add'l ch e protection rglar protection	VICE idential	RATE PP PP \$10	NFL Re	DRY OF SERVICE	\$40.0
Kales	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	BLOC RATE C \$14.95 \$14.95 \$35.00	K 1 CATE nstall • Mc • Co • Pa • Pa • Fir • Bu Other • Re	GORY OF SER ation: Non-res otel, hotel mmercial y cable y cable-add'l ch e protection rglar protection services:	VICE idential	RATE PP PP \$10 \$10.00	NFL Re	DRY OF SERVICE	\$40.0
Kales	brief (two- or three-word) description CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	BLOC RATE C \$14.95 \$14.95 \$35.00	K 1 CATE(nstall • Mc • Co • Pa • Pa • Fir • Bu Other • Re • Dis	GORY OF SER ation: Non-res otel, hotel ommercial y cable y cable-add'I ch e protection rglar protection services: econnect	VICE idential	RATE PP PP \$10 \$10.00	NFL Re	DRY OF SERVICE	\$40.0

Name	LEGAL NAME OF OWNER OF	- CABLE SYSTEM:		SYSTEM		
Name	Dumont Telephone C	ompany		31		
	PRIMARY TRANSMITTERS:	TELEVISION				
G	carried by your cable syster FCC rules and regulations i	entify every television station (including tr m during the accounting period, <i>except</i> in effect on June 24, 1981, permitting the	(1) stations carried only on a part- e carriage of certain network progr	-time basis under rams [sections		
Primary ransmitters: Television						
	• Do not list the station here station was carried only on	e in space G—but do list it in space I (the		-		
	basis. For further informatio Column 1: List each station	on concerning substitute basis stations, s n's call sign. <i>Do not</i> report origination pr d with a station according to its over-the-	see page (v) of the general instruc rogram services such as HBO, ES	ctions. SPN, etc. Identify each		
	"WETA-2" as the same on t Column 2: Give the channed	5	C 1 1 1			
	Column 3: Indicate in each educational station, by ente	n case whether the station is a network si ering the letter "N" (for network), "N-M" (for , "E" (for noncommercial educational), or	or network multicast), "I" (for inder	pendent), "I-M"		
	For the meaning of these te Column 4: Give the location	erms, see page (iv) of the general instruc on of each station. For U.S. stations, list t idian stations, if any, give the name of the	ctions in the paper SA1-2 form. the community to which the statior	n is licensed by the		
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION		
	KCRG-TV	9	N	Cedar Rapids, IA		
	KCRGDT		N-M	Cedar Rapids, IA		
Rows as Necessary	KCRGDT2		N-M	Cedar Rapids, IA		
Nowsatt						
	KCRGDT3	1	N-M	Cedar Rapids, IA		
			N-M	Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT3 KCRGDT4 KCRGDT5			Cedar Rapids, IA		
	KCRGDT4 KCRGDT5	n	N-M N-M	Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6	28	<u>N-M</u>	Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA	28	N-M N-M N-M N	Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT	28	N-M N-M N-M N N-M	Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2	28	N-M N-M N-M N N-M N-M	Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT3	28	N-M N-M N-M N N-M N-M N-M	Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT3 KFXADT4		N-M N-M N-M N-M N-M N-M N-M N-M	Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT3 KFXADT4 KGAN	28	N-M N-M N-M N-M N-M N-M N-M N-M N-M	Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT3 KFXADT4 KGAN KGANDT		N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT3 KFXADT4 KGAN KGANDT KGANDT2		N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT3 KFXADT4 KGAN KGANDT KGANDT2 KGANDT3	2	N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT3 KFXADT4 KGAN KGANDT KGANDT2 KGANDT3 KPXR-TV		N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT3 KFXADT3 KFXADT4 KGAN KGANDT KGANDT2 KGANDT2 KGANDT3 KPXR-TV KPXRDT	2	N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT3 KFXADT4 KGAN KGANDT KGANDT2 KGANDT2 KGANDT2 KGANDT3 KPXR-TV KPXRDT	2	N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	Cedar Rapids, IA Cedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT3 KFXADT3 KFXADT4 KGAN KGANDT KGANDT KGANDT2 KGANDT2 KGANDT3 KPXR-TV KPXRDT2 KPXRDT3	2 48	N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	Cedar Rapids, IACedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT2 KFXADT3 KFXADT4 KGANDT4 KGANDT KGANDT2 KGANDT2 KGANDT3 KPXR-TV KPXRDT KPXRDT2 KPXRDT3 KDIN	2	N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	Cedar Rapids, IACedar Rapids, IA		
	KCRGDT4 KCRGDT5 KCRGDT6 KFXA KFXADT KFXADT2 KFXADT3 KFXADT3 KFXADT4 KGAN KGANDT KGANDT KGANDT2 KGANDT2 KGANDT3 KPXR-TV KPXRDT2 KPXRDT3	2 48	N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	Cedar Rapids, IACedar Rapids, IA		

Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name	Dumont Telephone Co	ompany		31
	PRIMARY TRANSMITTERS:	TELEVISION		
G	carried by your cable systen FCC rules and regulations ir	ntify every television station (including n during the accounting period, <i>except</i> n effect on June 24, 1981, permitting th	t (1) stations carried only on a part- ne carriage of certain network progr	-time basis under rams [sections
Primary ransmitters: Television	substitute program basis, as Substitute Basis Stations:	e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. With respect to any distant stations ca		
	• Do <i>not</i> list the station here station was carried <i>only</i> on			
	basis. For further information Column 1: List each station	also in space I, if the station was carried in concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p I with a station according to its over-the he form.	see page (v) of the general instruc program services such as HBO, ES	tions. PN, etc. Identify each
	Column 2: Give the channe of license. For example, WF Column 3: Indicate in each educational station, by enter	el number the FCC assigned to the tele RC is channel 4 in Washington, D.C. case whether the station is a network s ring the letter "N" (for network), "N-M" (station, an independent station, or (for network multicast), "I" (for indep	a noncommercial pendent), "I-M"
	For the meaning of these ter Column 4: Give the location	"E" (for noncommercial educational), o erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of the dian stations, if any, give the name of the dian stations.	ictions in the paper SA1-2 form. the community to which the station	n is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KDINDT4		E-M	Des Moines, IA
	КЖКВ	20	N	Iowa City, IA
	КЖКВДТ		N-M	Iowa City, IA
	1			
	KWKBDT2		N-M	Iowa City, IA
	KWKBDT2 KWWL	7	<u>N-M</u> N	lowa City, IA Waterloo, IA
		7		
	KWWL	7	N	Waterloo, IA
	KWWL KWWLDT	7	N N-M	Waterloo, IA Waterloo, IA
	KWWL KWWLDT KWWLDT2	7	N N-M N-M	Waterloo, IA Waterloo, IA Waterloo, IA
	KWWL KWWLDT KWWLDT2 KWWLDT3	7	N N-M N-M N-M	Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA
	KWWL KWWLDT KWWLDT2 KWWLDT3 KWWLDT4	7	N N-M N-M N-M N-M	Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA
	KWWL KWWLDT KWWLDT2 KWWLDT3 KWWLDT4 KWWLDT5		N N-M N-M N-M N-M N-M	Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA
	KWWL KWWLDT KWWLDT2 KWWLDT3 KWWLDT4 KWWLDT5 KCCI		N N-M N-M N-M N-M N-M N-M	Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Des Moines, IA
	KWWL KWWLDT KWWLDT2 KWWLDT3 KWWLDT4 KWWLDT5 KCCI KCCIDT		N N-M N-M N-M N-M N-M N-M	Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Des Moines, IA Des Moines, IA
	KWWL KWWLDT KWWLDT2 KWWLDT3 KWWLDT4 KWWLDT5 KCCI KCCIDT KCCIDT2		N N-M N-M N-M N-M N-M N-M N-M	Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Des Moines, IA Des Moines, IA Des Moines, IA
	KWWL KWWLDT KWWLDT2 KWWLDT3 KWWLDT4 KWWLDT5 KCCI KCCIDT KCCIDT2 KCCIDT3	8	N N-M N-M N-M N-M N-M N-M N-M N-M N-M	Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Des Moines, IA
	KWWL KWWLDT KWWLDT2 KWWLDT3 KWWLDT4 KWWLDT5 KCCI KCCIDT KCCIDT2 KCCIDT3 KCWI	8	N N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Des Moines, IA
	KWWL KWWLDT KWWLDT2 KWWLDT3 KWWLDT4 KWWLDT5 KCCI KCCIDT KCCIDT2 KCCIDT3 KCWI KCWIDT KCWIDT2	8	N N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	Waterloo, IA Des Moines, IA
	KWWL KWWLDT2 KWWLDT3 KWWLDT3 KWWLDT4 KWWLDT5 KCCI KCCIDT KCCIDT2 KCCIDT2 KCCIDT3 KCWI KCWIDT	8 23	N N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	Waterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IADes Moines, IA
	KWWLKWWLDTKWWLDT2KWWLDT3KWWLDT4KWWLDT5KCCIKCCIDTKCCIDT3KCWIKCWIDT4KCWID72KCWID73KCWID73KDMI	8 8 23 56	N N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	Waterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IADes Moines, IA
	KWWLKWWLDTKWWLDT2KWWLDT3KWWLDT4KWWLDT5KCCIKCCIDTKCCIDT2KCCIDT3KCWIKCWIDTKCWIDT3KDMIKDSM	8 23	N N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	Waterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IADes Moines, IA
	KWWLKWWLDTKWWLDT2KWWLDT3KWWLDT4KWWLDT5KCCIKCCIDTKCCIDT3KCWIKCWIDTKCWIDT3KCWIDT3KDSMKDSMDT	8 8 23 56	N N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	Waterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IADes Moines, IA
	KWWLKWWLDTKWWLDT2KWWLDT3KWWLDT4KWWLDT5KCCIKCCIDTKCCIDT2KCCIDT3KCWIKCWIDTKCWIDT3KDMIKDSM	8 8 23 56	N N-M N-M N-M N-M N-M N-M N-M N-M N-M N-	Waterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IAWaterloo, IADes Moines, IA

Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTE
Name	Dumont Telephone Co	ompany		3
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary ransmitters: Television	carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Stations basis under specific FCC ru	entify every television station (including tr m during the accounting period, <i>except</i> (in effect on June 24, 1981, permitting the e)(2) and (4), or 76.63 (referring to 76.61 s explained in the next paragraph. : With respect to any distant stations car ules, regulations, or authorizations: e in space G—but do list it in space I (the a substitute basis.	(1) stations carried only on a par- e carriage of certain network prog (e)(2) and (4))]; and (2) certain s rried by your cable system on a s	t-time basis under grams [sections tations carried on a substitute program
	List the station here, and a basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t Column 2: Give the channel of the channe	also in space I, if the station was carried on concerning substitute basis stations, s n's call sign. <i>Do not</i> report origination pro d with a station according to its over-the-	see page (v) of the general instru rogram services such as HBO, Es air designation. For example, re	ctions. SPN, etc. Identify each port multistream
	educational station by ente	ering the letter "N" (for network), "N-M" (for	or network multicast) "I" (tor inde	ependent) "I-M"
	(for independent multicast), For the meaning of these te Column 4: Give the location	"E" (for noncommercial education), in the (re erms, see page (iv) of the general instruc n of each station. For U.S. stations, list the dian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER	"E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the statio	ational multicast). on is licensed by the
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac 1. CALL SIGN	"E" (for noncommercial educational), or erms, see page (iv) of the general instruc n of each station. For U.S. stations, list th dian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER	"E-M" (for noncommercial educations in the paper SA1-2 form. the community to which the station e community with which the station 3. TYPE OF STATION	ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION
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Dumont Tel	F OWNER OF C							SYSTEM I 312
	t every radio s	station ca	arried on a separate and discre nerally receivable by your cab					н
receivable if (1) on the basis of For detailed inf paper SA1-2 fo Column 1: I Column 2: S Column 3: I signal, indicate Column 4: C) it is carried b monitoring, to ormation abou rm. dentify the call State whether f f the radio stat this by placing Sive the station	y the sys be recei at the Co l sign of o the static ion's sign g a checl n's locati	I-Band FM Carriage: Under C stem whenever it is received at 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 the community with which the	t the system's he system's FM ante his point, see par ed by the cable s e station is licens	adend, and (2 nna, during co ge (v) of the g ystem as a se sed by the FC) it can l ertain st eneral ir parate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
	FM	C/D	Hampton, IA			C, D		
		l						
								

Accounting Perio	od: 2020/1					F	ORM SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:				SYSTEM ID#
Name	Dumont Telephone Co	ompany					31293
	SUBSTITUTE CARRIAG				G		
1		-	-				
	In General: In space I, ident						
Cubatituta	substitute basis during the a explanation of the programm						
Substitute Carriage:					ne general in		
Special	1. SPECIAL STATEMEN	-					
Statement and	 During the accounting per 	riod, did you	ur cable syster	n carry, on a substitute ba	sis, any noni	network television p	
Program Log	broadcast by a distant sta	tion?				YES	
	Note: If your answer is "No	" loovo tha	roct of this pa	ao blank. If your answor i	- "Voc " vou u	must complete the r	
		, leave life	rest of this pa	ige blank. If your answer is	s res, your	nusi complete the p	nogram
	log in block 2.						
	2. LOG OF SUBSTITUTI						
	In General: List each subs				s wherever p	ossible, if their mea	ning is
	clear. If you need more spa			vision program ("substitute	program") t	hat during the acco	unting
	period, was broadcast by a						
	under certain FCC rules, re						
	Do not use general categor						
	"NBA Basketball: 76ers vs.						-
				er "Yes." Otherwise enter			
				asting the substitute prog			
				the community to which th			or, in
	the case of Mexican or Car			stem carried the substitute			e month
	first. Example: for May 7 gi		when your sy		e program. O	se numerais, with t	
			e substitute pr	ogram was carried by you	r cable svste	m. List the times ac	curately
	to the nearest five minutes.						
	stated as "6:00–6:30 p.m."		1 0	, ,	•	·	
				n was substituted for prog			
	to delete under FCC rules						program
	was substituted for program		your system w	as permitted to delete und	ler FCC rules	and regulations in	
	effect on October 19, 1976						
					\//HE	N SUBSTITUTE	
	s	UBSTITUT	E PROGRAM	1		AGE OCCURRED	7. REASON FOR
		2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	DELETION
	1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM – TO	
						—	
						_	
						-	
						_	
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						_	
						_	
1							

Accounting Period:	2020/1			FORM S	SA1-2E. PAGE 6.
Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:			:	SYSTEM ID#
Name	Dumont Telephone Company				31293
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file an 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. IMPORTANT: You must complete a statement in space P concerning gross receipting the statement in space P concerning gross receipting the statement in space P concerning gross receipting period.	ystem's se	condary transm o compute this a	ission service amount, see \$2	
		-			
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 L	LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty accounting period is \$52.00	y fee that ye	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				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lin	ies 1 and 2		· .	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES	S (but mo	ore than \$137,1	00)	
	1. Base amount under statutory formula	\$	263,800.00		
	2. Enter amount of gross receipts from space K	\$	235,523.00		
	3. Subtract line 2 from line 1	\$	28,277.00		
	4. Enter the amount of gross receipts from space K		\$ 2	235,523.00	
	5. Enter the amount from line 3		. \$	28,277.00	
	6. Subtract line 5 from line 4		\$ 2	207,246.00	
	7. Multiply line 6 by .005 (enter figure here)			\$	1,036.23
	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		\$	1,036.23
	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				
			•		
	- 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 DU	E			
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	1,036.23	
	2. Filing Fee (See the instructions for more information on filing fee calculations) .		\$	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	1,056.23
	Important: Your remittance must be in the form of an electronic payr See page i of the general instructions in the paper SA1		-		ghts!

Accounting Period:	2020/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Dumont Telephone Company	SYSTEM ID# 31293
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations 2. Enter the total number of activated channels on broadcast stations on which the cable system carried television broadcast stations and nonbroadcast services	61 299
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information		(641) 857-3211
	Address 506 Pine St, PO Box 349 (Number, street, rural route, apartment, or suite number) Dumont, IA 50625-0349 (City, town, state, zip)	
	Email rogerkr@dumonttelephone.com Fax (optional) (641) 857-330	20
O Certification	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space I (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cables in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ow in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	system as identified ner of the cable system
	X /s/ Roger Kregel 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: Roger Kregel Title: General Manager	
	(Title of official position held in corporation or partnership) Date: 8/6/20	

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

ounting Period: 2020/1	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
nont Telephone Company	3129
 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 Y ES. Enter the total here and list the satellite carrier(s) below. 	P Special Statement Concerning Gross Receipts Exclusion
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
	Q Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
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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.