This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

## SA1-2E Short Form

Return completed workbook FOR COPYRIGHT OFFICE USE ONLY by email to: STATEMENT OF ACCOUNT for Secondary Transmissions by DATE RECEIVED AMOUNT coplicsoa@loc.gov Cable Systems (Short Form) \$ For additional information, contact the U.S. Copyright General instructions are located Office Licensing Division at: Tel: (202) 707-8150 in the first tab of this workbook ALLOCATION NUMBER 07/28/2020

A	ACCO	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(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 cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.	
Owner		List any other name or names under which the owner conducts the business of the cable system.	
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.	
		62 Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	2131
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		CABLE & CELLULAR COMMUNICATIONS, LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM P.O. BOX 280	
		(Number, street, rural route, apartment, or suite number) CIRCLE, MT 59215 (City, town, state, zip)	
•	INSTR	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unle	ess these
С		s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in sp	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	

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

Accounting Period:	2020/1	
Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b. SYSTEM ID#
Name	CABLE & CELLULAR COMMUNICATIONS, LLC	62131
D Area Served	Instructions: List each separate community served by the cable system. A "communit "a separate and distinct community or municipal entity (including unincorporated con discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lise as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho identified city.	nmunities within unincorporated areas and including single, t will serve as a form of system identification hereafter known
	CITY OR TOWN	STATE
First	MILES CITY	MT
Community		
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF CA							FORM SA1	TEM ID
Name			TIONO					515	6213
	CABLE & CELLULAR CO	JIVIIVIUNICA		, LLC					
Е	SECONDARY TRANSMISSION	SERVICE: SL	IBSCRIE	BERS AND RA	TES				
E	In General: The information in s								
Secondam.	system, that is, the retransmissic about other services (including p								
Secondary Transmission	last day of the accounting period							ig on the	
Service: Sub-	Number of Subscribers: Both	<b>`</b>		,	,	/	ole system,	broken	
scribers and	down by categories of secondary	rransmission	service.	In general, you	ı can com	pute the numbe	er of subscri	bers in	
Rates	each category by counting the nu							charged	
	separately for the particular servi <b>Rate:</b> Give the standard rate cl							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. <b>Note</b> categories, that person or entity								
	subscriber who pays extra for ca								
	first set" and would be counted o								
	Block 2: If your cable system h								
	printed in block 1 (for example, ti								
	with the number of subscribers a sufficient.	nd rates, in the	e right-ha	and block. A tw	o- or three	e-word descript	ion of the se	ervice is	
		DCK 1					BLOCK	2	
		NO. OF		DATE	0.17			NO. OF	DAT
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RATI
	Service to first set		1,995	37.45					
	Service to additional set(s)		1,995	37.43					
	• FM radio (if separate rate)		46	11 20					
	Motel, hotel		46	11.20					
	Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISS	SIONS: RATES	:				
-	In General: Space F calls for rat					l your cable sys	tem's servio	ces that were	
F	not covered in space E, that is, th								
0	service for a single fee. There are								
Services Other Than	furnished at cost or (2) services of amount of the charge and the un								
Secondary	enter only the letters "PP" in the		usually	billed. If arry fa			able per-pre	gram basis,	
ransmissions:	Block 1: Give the standard rate	e charged by t							
Rates	Block 2: List any services that								
	listed in block 1 and for which a s brief (two- or three-word) descrip				hed. List	these other serv	vices in the	form of a	
	bhei (two- of three-word) descrip								
	CATEGORY OF SERVICE	BLO RATE	-	ORY OF SER		RATE	CATECO	BLOCK 2 ORY OF SERVICE	RATE
	Continuing Services:	RAIL		tion: Non-resi		RATE	CATEGO	DRT OF SERVICE	KAIL
	Pay cable			el, hotel	aeritiai		СНОІСЕ	=	127.4
	• Pay cable—add'l channel			nmercial			ULTIMA		142.4
	Fire protection		-	cable				ENCORE	13.9
	•Burglar protection			cable-add'l ch	annel				13.9
	Installation: Residential			protection			HBO		17.9
	• First set	25.00		glar protection			пво		
	Additional set(s)	20.00		ervices:					
	• FM radio (if separate rate)			connect		25.00			
	• Converter			connect		23.00			
	Converter								
				lot rolocation					
				let relocation /e to new addre		25.00			

nting Period:	2020/1			FORM SA1-2	
Name	LEGAL NAME OF OWNER O			SYS	TEM ID
		R COMMUNICATIONS, LLC			6213
G Primary nsmitters: elevision	PRIMARY TRANSMITTERS: In General: In space G, id carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61( substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do <i>not</i> list the station here, station was carried <i>only</i> or • List the station here, and basis. For further informati Column 1: List each statio multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, V Column 3: Indicate in eacl educational station, by enti (for independent multicast) For the meaning of these t	TELEVISION entify every television station (including em during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th (e)(2) and (4), or 76.63 (referring to 76.6 as explained in the next paragraph. <b>s:</b> With respect to any distant stations ca rules, regulations, or authorizations: re in space G—but do list it in space I (th n a substitute basis. also in space I, if the station was carrie on concerning substitute basis stations, on's call sign. <i>Do not</i> report origination p ed with a station according to its over-the	t (1) stations carried only on a part ne carriage of certain network prog (1(e)(2) and (4))]; and (2) certain si arried by your cable system on a sine Special Statement and Program d both on a substitute basis and al see page (v) of the general instru- brogram services such as HBO, ES e-air designation. For example, re- evision station for broadcasting over station, an independent station, or (for network multicast), "I" (for inde or "E-M" (for noncommercial educa- lictions in the paper SA1-2 form.	t-time basis under grams [sections tations carried on a ubstitute program n Log)—if the lso on some other ctions. SPN, etc. Identify each port multistream er the air in its community r a noncommercial upendent), "I-M" ational multicast).	
		on of each station. For U.S. stations, list adian stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER	2		
	КНМТ	22	N	Billings, MT	
	KSVI	18	N	Billings, MT	
as Necessary	KTVQ	10	N	Billings, MT	
snecessary	KUSM	8	E	Bozeman, MT	
	KULR	11	N	Billings, MT	
	KULK KTVQ-CW	10	N-M	Billings, MT	
	KTGF-ME.TV	14	N-M	Great Falls, MT	
	KTVQ-HD	14	N-W		
				Billings, MT	
	KULR-HD	11	N	Billings, MT	
	KHMT-HD	22	N	Billings, MT	
	KSVI-HD	18	N 	Billings, MT	
	KUSM-HD	8	E	Bozeman, MT	
	KTVQ CW-HD	10	<b>N-M</b>	Billings, MT	

Accounting F	Period: 2020	/1					FORM	I SA1-2E. PAGE 4.
LEGAL NAME OF			YSTEM: JNICATIONS, LLC					SYSTEM ID# 62131
PRIMARY TRA In General: Lis all-band basis v Special Instruct receivable if (1)	NSMITTERS t every radio s vhose signals ctions Conce i it is carried b	: RADIO station ca were ge rning Al y the sys	arried on a separate and discr nerally receivable by your cat I-Band FM Carriage: Under stem whenever it is received a	ble system during Copyright Office r It the system's he	the accountin regulations, ar adend, and (2	ng perioo n FM sig 2) it can	1. nal is generally be expected,	H Primary Transmitters:
For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: G	ormation abou rm. dentify the cal state whether the radio stat this by placing Sive the station	It the Co I sign of the static tion's sig g a checl n's locati	ived at the headend, with the opyright Office regulations on each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	this point, see pa sed by the cable s ne station is licen:	ge (v) of the g system as a se sed by the FC	jeneral i eparate	nstructions in the. and discrete	Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D		
CALL SIGN		5/D	LUCATION OF STATION	CALL SIGN	AIVI OF FIM	S/D	LOCATION OF STATION	
		+						
		+						
							I	

Name         CABLE & CELLULA ROMUNICATIONS, LLC         SYSTEM DB           SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOC         62131           II         In General: In page 1, lotently wery nonetwork television program. Iteradeate by a distart staten, that your cable system cared on a segment of the programming the accounting prevent, during specific present and torms FCC tures, regulatance, and at buffer distance base called, under specific prevent and torms FCC tures, regulatance, and the term SAL2 form.           Substitute         SPECIAL STATEMENT CONCENTIONS SUBSTITUTE CARRIAGE         Yes, "you must complete the program Big base called, under specific pregnam State State."           Note: If your answer is "No", leave the rest of this page bank. If your answer is "Yes," you must complete the program Big holds?         2.1 CoO FS BUSTITUTE PROGRAMS           Column 3: Give the call state station are distribute program "base that divertify in their information. Do not not spece, phase and addition to rongam." Under their information. Do not not spece, phase and addition to rongam. "Low Lucy" or base to be called.           Column 3: Give the call station bacterize the substitute program." It has during the accounting period, was tradecast by a distance statement with the station is increased on their information. Do not not call the program was substituted for the program. To back their information. Do not not call the program was substituted program. The Mase accounting the divertify the statement is statement attatement with the statement is statement. The program was substituted program. The back the program. The divertify the program. The program was called by your calle system. The state of the callegre (TH) is the program. The program.	Accounting Perio	od: 2020/1					FOF	RM SA1-2E. PAGE 5.
CALLE & CELLOLAR COMMUNICATIONS, ELC         62131           I         SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG         In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under special for present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.           1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE         *During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?         No           Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.         2. LOG OF SUBSTITUTE PROGRAMS           In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables.         Column 1: Give the title of every nonnetwork television program "substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system carries for example, "I Love Lucy" or "NBA Basketball: TGers vs. Bulls."           Column 2: Give the title or please add additional rows to but abbes.         Column 3: Give the program was broadcast live, enter "Yes." Otherwise enter "No."           Column 2: Give the title of every nonnetwork television program (substitute program. Log or "NBA Basketball: TGers vs. Bulls."         Column 4: Give the broadcast station is cleaton		LEGAL NAME OF OWNER OF						
In General: In space I, identify <i>every nonnetwork television program,</i> broadcast by a <i>distant</i> station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the program log the back 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television, so rauthorizations. For units to include the substitute program. Togram 'Yes,'' you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television, so rauthorizations, for example, ''I Love Lucy' or ''NBA Basketbal:'' Gers vs. Bulls:'' Column 2: If the program was broadcast live, enter 'Yes.'' Otherwise enter 'No.'' Column 2: Give the call sign of the station scating the substitute program. Column 3: Give the call sign of the station scating the substitute program. Column 4: Give the times when the substitute program. Use numerals, with the month first. Example: for May 7 give ''57.'' Column 6: State the times when the substitute program was carried by our cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as '6:00-6:30 p.m.''. Column 7: Enter the letter ''R' if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect on October 19, 1976.	Name	CABLE & CELLULAR	COMMUN	ICATIONS, I				62131
In General: In space I, identify <i>every nonnetwork television program,</i> broadcast by a <i>distant</i> station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the program log the back 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television, so rauthorizations. For units to include the substitute program. Togram 'Yes,'' you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television, so rauthorizations, for example, ''I Love Lucy' or ''NBA Basketbal:'' Gers vs. Bulls:'' Column 2: If the program was broadcast live, enter 'Yes.'' Otherwise enter 'No.'' Column 2: Give the call sign of the station scating the substitute program. Column 3: Give the call sign of the station scating the substitute program. Column 4: Give the times when the substitute program. Use numerals, with the month first. Example: for May 7 give ''57.'' Column 6: State the times when the substitute program was carried by our cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as '6:00-6:30 p.m.''. Column 7: Enter the letter ''R' if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect on October 19, 1976.		SUBSTITUTE CARRIAGE	- SPECIA			3		
Substitute       substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.         1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE         • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?         Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.         2. LOG OF SUBSTITUTE PROGRAMS         In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you and more space, please add additional rows to the tables.         Column 1: Give the tife of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substitute for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball." General: Site the call sign of the station broadcast tip the station site orgram. Column 3: Give the call sign of the station so carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 60:11:5 p.m. to 628:30 p.m.         Column 3: Give the call sign of the station sin effect during the accounting period, was broadcast stations is denty orgoram.	I I						ion that your cable syste	em carried on a
Carriage: Special Statement and Program Log       1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE         • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?       YES         Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.       2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under cartian FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: T6ers vs. Bulls." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program was substituted of system form 6:0:115 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted to delete under FCC rules and regulations in effect ouring the accounting period; enter the letter "P" if the listed progra	-							
Special Statement and Program Log       • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?       • VES       • Not         Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.       2. LOG OF SUBSTITUTE PROGRAMS       In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables.         Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program.         Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian station and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was scarried by your cable system. List the times accurately to the nearest five minutes. Example: a program carrie		explanation of the programm	ing that mus	t be included in	this log, see page (v) of the	e general instr	uctions in the paper SA1	-2 form.
Statement and Program Log       During the becoming period, but you cable system carry, on a substitute basis, but non-texticity to broadcast by a distant station?       Image and becoming period.         Statement and Program Log       broadcast by a distant station?       Image and becoming period.       Image and becoming period. <t< th=""><th>-</th><th></th><th>-</th><th></th><th></th><th></th><th></th><th></th></t<>	-		-					
Program Log       Proadcast by a distant station?       YES       NO         Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.       2. LOG OF SUBSTITUTE PROGRAMS         In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables.       Column 1: Give the titte of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do no tuse general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."         Column 3: Give the call sign of the station broadcasting the substitute program.       Column 4: Give the call sign of the station is location (the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian stations are carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57."         Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m."         <			-	r cable system	carry, on a substitute basi	s, any nonne	twork television prograr	
log in block 2.         2. LOG OF SUBSTITUTE PROGRAMS         In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables.         Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: The program was broadcast live, enter "Yes." Otherwise enter "No."         Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."         Column 3: Give the call sign of the station broadcasting the substitute program.         Column 4: Give the broadcast station's location (the community with which the station is identified).         Column 6: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57."         Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m."         Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program wa		broadcast by a distant stat	tion?				YES	X NO
2. LOG OF SUBSTITUTE PROGRAMS         In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables.         Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."         Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."         Column 3: Give the call sign of the station broadcasting the substitute program.         Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).         Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."         Column 6: State the times when the substitute program was carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m."         Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted to delete under FCC rules and regulations in effect during the accounting p		Note: If your answer is "No'	, leave the	rest of this pag	e blank. If your answer is "	Yes," you mu	ist complete the progra	m
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was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.       WHEN SUBSTITUTE         SUBSTITUTE PROGRAM       WHEN SUBSTITUTE         1. TITLE OF PROGRAM       2. LIVE?       3. STATION'S								
effect on October 19, 1976.           WHEN SUBSTITUTE         WHEN SUBSTITUTE           SUBSTITUTE PROGRAM         CARRIAGE OCCURRED         7. REASON FOR           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES								ram
SUBSTITUTE PROGRAM     CARRIAGE OCCURRED     7. REASON FOR       1. TITLE OF PROGRAM     2. LIVE?     3. STATION'S     5. MONTH     6. TIMES								
SUBSTITUTE PROGRAM     CARRIAGE OCCURRED     7. REASON FOR       1. TITLE OF PROGRAM     2. LIVE?     3. STATION'S     5. MONTH     6. TIMES								
1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES		s	UBSTITUT	E PROGRAM	1			7. REASON FOR
Yes or No       CALL SIGN       4. STATION'S LOCATION       AND DAY       FROM       — TO		1. TITLE OF PROGRAM						DELETION
Image: second			Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO	
Image: Section of the section of th								
Image: second								
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Image: second								
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								1

Accounting Period:	2020/1			FORM S	A1-2E. PAGE 6.
Name				5	SYSTEM ID#
	CABLE & CELLULAR COMMUNICATIONS, LLC				62131
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 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 s n of how	econdary trans to compute this	mission servi s amount, see \$ 45	се
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 th	nan \$527,600	\$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,1	100 OR L	ESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty f accounting period is \$52.00	fee that yo	ou must pay for	this six-month	
	Line 1. Royalty fee for accounting period				
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines	s 1 and 2		·	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS	6 (but mo	ore than \$137,	100)	
	1. Base amount under statutory formula		263,800.00		
	2. Enter amount of gross receipts from space K				
	3. Subtract line 2 from line 1				
	4. Enter the amount of gross receipts from space K				
	5. Enter the amount from line 3	· · · · · · · .			
	6. Subtract line 5 from line 4	· .			
	7. Multiply line 6 by .005 (enter figure here)				
	8. Interest charge. Enter the amount from line 4, space Q, page 8		·····.		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 ar	nd 8	······.		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,8	300 (but l	less than \$527	,600)	
	1. Enter the amount of gross receipts from space K	i	458,612.70		
	2. Base amount under statutory formula	i	263,800.00		
	3. Subtract line 2 from line 1	;	194,812.70		
	4. Multiply line 3 by .01	••••••	\$	1,948.13	
	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	5, and 6 .	· · · · · · · · · · · · · · · · · · ·	\$	3,267.13
	FILING FEE AND TOTAL REMITTANCE DUE				
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	· · · · · · · · · · · · · · · · · · ·	\$	3,267.13	
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			\$	3,287.13
	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:	2020/1		FORM SA1-2E. PAGE 7
Name		OWNER OF CABLE SYSTEM: LULAR COMMUNICATIONS, LLC	SYSTEM ID# 62131
M Channels	to its subscribe 1. Enter the to system carrie	You must give (1) the number of channels on which the rs, and (2) the cable system's total number of activated al number of channels on which the cable d television broadcast stations	channels during the accounting period.
	on which the	cable system carried television broadcast stations	13
N Individual to Be Contacted		O BE CONTACTED IF FURTHER INFORMATION IS I about this statement of account.)	NEEDED (Identify an individual to whom
for Further Information	Name	Annie Edwards	Telephone 406-485-3301
	Address	P.O. Box 280 (Number, street, rural route, apartment, or suite number) Circle, MT 59215	
	Email	(City, town, state, zip)	Fax (optional)
O Certification	I, the undersig     (Ow     (Age	nt of owner other than corporation or partnership) I an	exes.) er of the cable system as identified in line 1 of space B; or n the duly authorized agent of the owner of the cable system as identified
	X (Off • I have examin are true, compl	n line 1 of space B and that the owner is not a corporation <b>cer or partner)</b> I am an officer (if a corporation) or a partn n line 1 of space B. ed the statement of account and hereby declare under pen te, and correct to the best of my knowledge, information, a ion 1001(1986)]	er (if a partnership) of the legal entity identified as owner of the cable system alty of law that all statements of fact contained herein
		-	Green ture on the line above to certify this statement. "/s/ signature" (e.g., /s/ John Smith)
		Typed or printed name: <b>Dennis G</b>	reen
		Title: President (Title of official position held in corpora	tion or partnership)

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

unting Period: 2020/1	FORM SA1-2E. PAG
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
LE & CELLULAR COMMUNICATIONS, LLC	621
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 fol- lowing 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 sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statemen Concerning Gros
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.	Receipts Exclusion
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	
YES. Enter the total here and list the satellite carrier(s) below	
Name Name Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	$\frown$
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 Assessme
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Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.