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

STATEMENT OF ACCOUNT	FOR COPYRIGH	IT OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u>
General instructions are located in the first tab of this workbook	08/25/2020	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A ACCOUNTING PERIOD COVERED	D BY THIS STATEMENT: (Y)	(YY/(Period))	

A	ACCU	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.
		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
		TDS Broadband Service LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		Baja Broadband
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		525 Junction Rd. (Number, street, rural route, apartment, or suite number)
		Madison, WI 53717-2152 (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	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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	TDS Broadband Service LLC	8340
D	Instructions: List each separate community served by the cable system. A "communit "a separate and distinct community or municipal entity (including unincorporated cor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis 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	nmunities within unincorporated areas and including single, t will serve as a form of system identification hereafter known
Area Served	identified city.	
	CITY OR TOWN	STATE
First	Socorro	NM
Community		
Add Rows as Necessary		
Add nows as necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:						SYS	TEM ID
Name	TDS Broadband Service	e LLC							834
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmission about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the n separately for the particular serv Rate: Give the standard rate of unit in which it is generally billed category, but do not include disc Block 1: In the left-hand block	SERVICE: SU pace E should on of television vay cable) in sp I (June 30 or D n blocks in spa y transmission umber of billing ice at the rate harged for eac . (Example: "\$2 counts allowed	cover al and rad bace F, n ecembe ce E call service. gs in that indicated h catego 20/mth"). for adva	I categories of s io broadcasts b ot here. All the r 31, as the cas for the number In general, you t category (the n d—not the numb ory of service. In . Summarize an nce payment.	secondary y your sy facts you e may be of subsc can com number of ber of set nclude bo ny standar	stem to subscri state must be f). ribers to the cal pute the number f persons or org s receiving serv th the amount or rd rate variation	bers. Give hose exist ole system of subsc anizations ice). If the charg s within a p	information ing on the , broken ribers in charged ge and the particular rate	
	systems most commonly provide that applies to your system. Not categories, that person or entity subscriber who pays extra for ca first set" and would be counted or Block 2: If your cable system printed in block 1 (for example, t with the number of subscribers a sufficient.	Where an in should be count to be service to once again und has rate catego iers of services and rates, in the	dividual nted as a additiona er "Serv ories for s that inc	or organization a subscriber in e al sets would be ice to additiona secondary tran lude one or mo	is receiving each apple included I set(s)." smission re second	ng service that icable category in the count ur service that are dary transmission	falls under . Example: der "Servi different f ons), list th ion of the s	different a residential ce to the rom those em, together service is	
	BLO	DCK 1					BLOCI		·
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATI	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RATE
	Residential: • Service to first set		150	60.74					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel Commercial		8 2	3.73-\$32.64					
	Converter								
	Residential		106	\$10.95/Mo.					
	Non-residential			••••••					
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip	e (not subscrit hose services re two exceptio or facilities furr hit in which it is rate column. te charged by t t your cable syst separate charge	ber) infor that are ns: you hished to usually he cable stem fun je was m	mation with res not offered in c do not need to nonsubscriber billed. If any rat system for eac nished or offere nade or establis	pect to al ombinatio give rate i s. Rate in es are ch ch of the a d during t	n with any seco information con formation shou arged on a vari applicable servio he accounting	ondary tran cerning (1) ld include l able per-pi ces listed. ceriod that	smission services ooth the rogram basis, were not	
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE		ORY OF SER		RATE	CATEG	ORY OF SERVICE	RATE
	Continuing Services: Pay cable	17.99-19.99		ition: Non-resi el, hotel	dential				
	Pay cable Add'l channel Fire protection	17.33-13.33	• Cor	nmercial cable		\$0 - \$99.95			
	•Burglar protection Installation: Residential		• Fire	cable-add'l cha	annel				
	 First set Additional set(s) FM radio (if separate rate) 	0-49.95 0-49.95	Other s • Rec	glar protection services: connect		0-25			
	• Converter			connect let relocation		19.98-39.96			

				SVSTEM
Name	LEGAL NAME OF OWNER (TDS Broadband Ser			SYSTEM 8
G Primary ransmitters: Television	carried by your cable syst FCC rules and regulations 76.59(d)(2) and (4), 76.61 substitute program basis, Substitute Basis Station basis under specific FCC • Do <i>not</i> list the station he station was carried <i>only</i> of • List the station here, and basis. For further informat Column 1: List each stati multicast stream associat "WETA-2" as the same or Column 2: Give the chan of license. For example, ' Column 3: Indicate in eace educational station, by em (for independent multicas For the meaning of these Column 4: Give the locat	dentify every television station (including the term during the accounting period, <i>except</i> is in effect on June 24, 1981, permitting the l(e)(2) and (4), or 76.63 (referring to 76.61 as explained in the next paragraph. ns: With respect to any distant stations car- rules, regulations, or authorizations: ere in space G—but do list it in space I (the on a substitute basis. d also in space I, if the station was carried tion concerning substitute basis stations, so on's call sign. <i>Do not</i> report origination pr ed with a station according to its over-the- n the form. nel number the FCC assigned to the telev WRC is channel 4 in Washington, D.C. ch case whether the station is a network si tering the letter "N" (for network), "N-M" (for t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- ion of each station. For U.S. stations, list t	(1) stations carried only on a par e carriage of certain network prog (e)(2) and (4))]; and (2) certain s ried by your cable system on a s e Special Statement and Program both on a substitute basis and al ee page (v) of the general instru- ogram services such as HBO, Es air designation. For example, re ision station for broadcasting over tation, an independent station, or or network multicast), "I" (for inde "E-M" (for noncommercial educa- tions in the paper SA1-2 form. he community to which the station	t-time basis under grams [sections tations carried on a substitute program in Log)—if the lso on some other ctions. SPN, etc. Identify each port multistream er the air in its community r a noncommercial ependent), "I-M" ational multicast).
	FCC. For Mexican or Can 1. CALL SIGN	2. B'CAST CHANNEL NUMBER	e community with which the station 3. TYPE OF STATION	A. LOCATION OF STATION
	KOAT	7.1	N	Albuquerque, NM
	KRQE	13.1	N	Albuquerque, NM
ows as Necessary	KRQE-DT2	13.2	N-M	Albuquerque, NM
ows as necessary				/
	KOBR	8.1	N	Roswell, NM
	KOBR KLUZ	8.1	N	Roswell, NM Albuquerque, NM
	KLUZ	14.1	N 	Albuquerque, NM
	KLUZ KASA	14.1 2.1	1	Albuquerque, NM Santa Fe, NM
	KLUZ KASA KNME	14.1 2.1 5.1	N 1 1 E 1	Albuquerque, NM Santa Fe, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME	14.1 2.1 5.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM
	KLUZ KASA KNME KCHF	14.1 2.1 5.1 11.1	1	Albuquerque, NM Santa Fe, NM Albuquerque, NM Albuquerque, NM

Namo	ounting Period	2020/1			FORM SA1-2E. PA
TDS Broadband Service LLC 8 Primary PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 076.63 (referring to 76.61(e)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. 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 1 (the Special Statement and Program Log)—If the station was carried only on a substitute basis station as: Column 1: List each station is concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station is call sign. Do not 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, 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). Column 4: Give the location of each station. For U.S. stations, list the communuity to which the station is licensed by the<	Nama	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:		SYSTEM
 G Primary Transmitters: Television In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. 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. Do not 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 multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational st	Name	TDS Broadband Service	LLC		8:
 G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. 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 1 (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. Do not 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 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 the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the 		PRIMARY TRANSMITTERS: TE	LEVISION		
Primary 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. 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. Do not 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 noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is	G	carried by your cable system d	during the accounting period, except	ot (1) stations carried only on a part-tim	ne basis under
 basis under specific FCC rules, regulations, or authorizations: Do <i>not</i> 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 <i>only</i> 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). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the 	Fransmitters:	76.59(d)(2) and (4), 76.61(e)(2 substitute program basis, as ex	2) and (4), or 76.63 (referring to 76.6 xplained in the next paragraph.	61(e)(2) and (4))]; and (2) certain static	ons carried on a
 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 page (iv) of the general instructions in the paper SA1-2 form. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the 		basis under specific FCC rules • Do <i>not</i> list the station here in station was carried <i>only</i> on a s	s, regulations, or authorizations: n space G—but do list it in space I (tl substitute basis.	the Special Statement and Program Lo	pg)—if the
		basis. For further information c Column 1: List each station's of multicast stream associated wi "WETA-2" as the same on the Column 2: Give the channel mi of license. For example, WRC Column 3: Indicate in each case educational station, by entering (for independent multicast), "E" For the meaning of these terms Column 4: Give the location of	concerning substitute basis stations, call sign. <i>Do not</i> report origination p ith a station according to its over-the form. number the FCC assigned to the tele C is channel 4 in Washington, D.C. ase whether the station is a network g the letter "N" (for network), "N-M" (" (for noncommercial educational), c is, see page (iv) of the general instru- fe each station. For U.S. stations, list	, see page (v) of the general instruction program services such as HBO, ESPN e-air designation. For example, report evision station for broadcasting over th station, an independent station, or a n (for network multicast), "I" (for indepen or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station is	ns. J, etc. Identify each t multistream ne air in its community noncommercial ndent), "I-M" nal multicast). : licensed by the
		1. CALL SIGN 2	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
		1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
		1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
		1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
		1. CALL SIGN :	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
		1. CALL SIGN :	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
		1. CALL SIGN :	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

EGAL NAME OF			/STEM:					SYSTEM II 83
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cat					Н
eceivable if (1) on the basis of a cor detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: If ignal, indicate Column 4: G	it is carried by monitoring, to prmation about m. lentify the call tate whether to the radio stat this by placing sive the station	y the sys be recein at the Co sign of a the static ion's sig g a check n's locati	I-Band FM Carriage: Under tem whenever it is received a ved at the headend, with the pyright Office regulations on each station carried. on is AM or FM. nal was electronically process (mark in the "S/D" column. on (the community to which the the community with which the	at the system's he system's FM ante this point, see pa sed by the cable s he station is licen	eadend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st jeneral ii eparate	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	
I/A		2.2		5. 122 51011				

Accounting Perio							FOF	RM SA1-2E. PAGE 5.
Name	LEGAL NAME OF OWNER OF		TEM:					SYSTEM ID#
Name	TDS Broadband Servio	ce LLC						8340
	SUBSTITUTE CARRIAG	E: SPECIA		NT AND PROGRAM LO	G			
Substitute	In General: In space I, ident substitute basis during the a explanation of the programm	ify <i>every nol</i> ccounting pe	nnetwork televis eriod, under spe	<i>sion program,</i> broadcast by ecific present and former FC	a <i>distant</i> stati C rules, regula	ations, or a	uthorizations	. For a further
Carriage:	1. SPECIAL STATEMEN				gonoral mour			
Special	 During the accounting per 				s, any nonnet	work telev	vision program	n
Statement and	broadcast by a distant sta	•	,	, ,	, ,		YES	XNO
Program Log	, , , , , , , , , , , , , , , , , , ,			a blank lfrann anarran is (·//			
	Note: If your answer is "No	, leave the	rest of this pag	e blank. If your answer is	"Yes," you mu	ist complet	te the progra	m
	log in block 2. 2. LOG OF SUBSTITUTE		MS					
	In General: List each subsicilear. If you need more space of the space	titute progra ce, please a of every no distant stati gulations, o ies like "mo Bulls." n was broad sign of the s adcast static radian static th and day ve "5/7." es when the Example: a er "R" if the and regulatio	im on a separa add additional r nnetwork televi ion and that yo r authorizations vies" or "baske dcast live, enter station broadca on's location (th ons, if any, the o when your sys e substitute pro program carrie listed program ons in effect du	rows to the tables. Ision program ("substitute jur cable system substitutes. See page (v) of the gene tball." List specific program r "Yes." Otherwise enter "N sting the substitute progra the community to which the community with which the tem carried the substitute jurgam was carried by your ed by a system from 6:01:" was substituted for progra ring the accounting period	program") tha d for the prog eral instruction h titles, for exa lo." m. station is lice station is iden program. Use cable system. 15 p.m. to 6:2 umming that y ; enter the lett	t, during th ramming o ns for furth ample, "I L nsed by th tified). numerals, List the tin 8:30 p.m. s our system cer "P" if th	ne accounting of another sta er informatio ove Lucy" or e FCC or, in , with the mo mes accurate should be n was <i>require</i> e listed prog	g ntion n. nth ely
	was substituted for program		our system wa	s permitted to delete unde	r FCC rules a	nd regulat	ions in	
	effect on October 19, 1976.		E PROGRAM	1		N SUBST		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. FROM	TIMES — TO	DELETION
							_	
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]					-	

Accounting Period:	2020/1 FORM SA1-2E. PAGE	E 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM I	
	TDS Broadband Service LLC 834	40
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see 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.	
	COPYRIGHT ROYALTY FEE	
L 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 but less than or equal to \$263,800 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. 	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six-mon accounting period is \$52.00	
	Line 1. Royalty fee for accounting period \$ 52.00	_
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	-
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2 \$ 52.00	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	-
	1. Base amount under statutory formula	
	2. Enter amount of gross receipts from space K	
	3. Subtract line 2 from line 1	
	4. Enter the amount of gross receipts from space K	
	5. Enter the amount from line 3	
	6. Subtract line 5 from line 4	
	7. Multiply line 6 by .005 (enter figure here)	_
	8. Interest charge. Enter the amount from line 4, space Q, page 8	-
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	_
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)	
	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 DUE	
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) \$ 52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations) \$ 15.00	-
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 67.00	
	EFT Trace # or TRANSACTION ID #	
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights. See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.	

Accounting Period:	2020/1		FORM SA1-2E. PAGE 7
Name		OF OWNER OF CABLE SYSTEM: Dand Service LLC	SYSTEM ID# 8340
M Channels	to its subscrib 1. Enter the to system carri	: You must give (1) the number of channels on which the cable system carried television broadcast stations bers, and (2) the cable system's total number of activated channels during the accounting period. total number of channels on which the cable ied television broadcast stations	9
		e cable system carried television broadcast stations adcast services	172
N Individual to Be Contacted		TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom ct about this statement of account.)	
for Further Information	Name	Stephanie Weber Telephone (6	608) 664-4721
	Address	525 Junction Rd (Number, street, rural route, apartment, or suite number)	
		Madison, WI 53717 (City, town, state, zip)	
	Email	finance@tdstelecom.com Fax (optional)	
Ο	CERTIFICATIO	DN (This statement of account must be certified and signed in accordance with Copyright Office regulations)	
Certification	• I, the undersig	igned, hereby certify that (Check one, but only one, of the boxes.)	
	(Ow	vner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or	r
		Jent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable syste in line 1 of space B and that the owner is not a corporation or partnership; or	em as identified
	X (Of	fficer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner in line 1 of space B.	of the cable system
	are true, comp	ned the statement of account and hereby declare under penalty of law that all statements of fact contained herein olete, and correct to the best of my knowledge, information, and belief, and are made in good faith.	
		X /s/ Sharon V. Tisdale	
		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: Sharon V. Tisdale	
		Title: Assistant Treasurer (Title of official position held in corporation or partnership)	
		Date: August 25, 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 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 telephoi numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in t completed record of statements of account, and it may affect the legal sufficiency of the fing, a determination that would be made by a court of law

unting Period: 2020/1	FORM SA1-2E. PAGI
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
Broadband Service LLC	834
 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? 	P Special Statemen Concerning Gross Receipts Exclusio
X NO YES. Enter the total here and list the satellite carrier(s) below	
Name Name Mailing Address Mailing Address	-
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	Q
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
x	
Line 2. Multiply line 1 by the intercent rate* and enter the sum here	-
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
xdays	
Line 3 Multiply line 2 by the number of days late and enter the sum here	-
Line 3 Multiply line 2 by the number of days late and enter the sum here x 0.00274	-
x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here	-
x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$	-
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 \$ - (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please	-
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 \$ - (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	-
x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	-
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 \$ - (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	-
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