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

STATEME	INT	OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to:
for Seconda	ry Tra	ansmissions by	DATE RECEIVED	AMOUNT	– coplicsoa@copyright.gov
Cable System General instruct in the first tab of	ctions	are located	3/1/2021	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150	
A	ACC	OUNTING PERIOD COVERED B	BY THIS STATEMENT: (YY	/YY/(Period))	
		2020/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
			Barcode Data Filing Period (optiona	I - see instructions)	
Accounting Period					
B Owner		the subsidiary, not that of the parent corpo List any other name or names under which	the owner conducts the business of th ccounting period, only the owner on th rent covering the entire accounting per	he last day of the accounting period should su riod.	
		LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM		
		CableSouth Media III, LLC			
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)	)	
		MAILING ADDRESS OF OWNER OF O 1056 Jones Blvd (Number, street, rural route, apartment, or suite nu Milan, TN 38358 (City, town, state, zip)			
С				ntify the business and operation of the esystem, if different from the address	
System	1	IDENTIFICATION OF CABLE SYSTEM: Swyft Connect LLC MAILING ADDRESS OF CABLE SYSTEM:			
	2	1056 Jones Blvd (Number, street, rural route, apartment, or suite nu Milan, TN 38358			
		(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#
Nume	CableSouth Media III, LLC	33540
D	unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you I community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or	ted communities within unincorporated areas and including single, discrete ist will serve as a form of system identification hereafter known as the "first
Served	city.	
<b>F</b> 1 (	CITY OR TOWN	STATE
First Community	Tylertown	MS
dd Rows as Necessary		

Formation         Description           Secondary Transmission         Secondary In denseral: The information in gace E should cover all categories of secondary transmission service of the cable system. balls is the transmission of the elevision and radio for uncloades by your system to subscribers. Give information service: Sub- scription: and the transmission of source in the cable system, backs and or by categories and so to December 31, as the case may be!           Rate:         Secondary sectors and service: Sub- scription: Sub- excliption: Sub- excliption: Sub- excliption: Sub- regardle) for the product in space E call for the number of subscribers in the cable system. The Sub- scription: Sub- scription: Sub- excliption: Sub- excliption: Sub- scription: Sub-									FORM SA1	
Formerodom         Secondary Information         Secondary Information         Secondary Information           Secondary Transmission Service: Sub- Rates         Secondary Protomation and other services (including pay callel) in space E. Find there, All the fast you sate must be those existing on the sate of the accounting period (Line and one of the called pay of the accounting period (Line and one of the called pay of the accounting period (Line and one of the called pay of the accounting period (Line and one of the called pay of the accounting period (Line and one of the called pay of the accounting period (Line and one of the called pay of the accounting period (Line and one of the called pay of the accounting period (Line and one of the called pay the secondary transmission service). Rete: Give the standard rate called point of the called pay and the int which it is generally bland (Standard Cine accounting the number of subscribers in accounting the accounting the called pay of services. Include both the ancount of the charge and the int which it is generally bland (Standard Cine accounting the called pay the subscriber who pays extra for cable service to account and the variation of the charge of the stat accounting the called the counted on a subscriber. Since the pay the subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted on a subscriber in called pay interministic set service to additional set(s).           Bick 2: If your cable system has rate categories to additional set(s).         Bick 2: If your cable system has rate categories to additional set(s).         Secondary transmission service to the first set secondary transmission service to the different for thom the system has commony travial to the services that arend the cable counted on a subscribers. Ret CatEcoRY OF SERVICE	Name								SYS	3354
E       In General: The information in space E should cover all categories of secondary transmission service of the cable         Secondary       Transmission         Transmission       Secondary         Services all       Secondary         Retes       Secondary         Retes       Secondary         Retes       Secondary         Rete       Secondary         Ret       Secondary <td></td> <td>CableSouth Media III, LL</td> <td>_C</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>5554</td>		CableSouth Media III, LL	_C							5554
F         Subscription         BLOCK 1         BLOCK 2           CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         NO.OF           CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS           Final         BLOCK 1         BLOCK 2         NO.OF         SUBSCRIPERS         RATE           CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE           CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS         RATE         CATEGORY OF SERVICE         SUBSCRIPERS	Secondary Transmission Service: Sub- scribers and	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 misseparately for the particular serv	pace E should on of television pay cable) in sp I (June 30 or D n blocks in spa y transmission umber of billing ice at the rate	cover all and radio pace F, no ecember ce E call f service. In gs in that o indicated-	categories of bootadcasts boot there. All the 31, as the cas or the number n general, you category (the n —not the num	secondar by your sy facts you se may be r of subso i can com number of ber of se	ystem to subscr u state must be a). cribers to the ca npute the number of persons or org ts receiving serving	ibers. Give those exis ble system er of subso ganizations vice).	i information ting on the n, broken ribers in s charged	
subscriber who pays extra for cable service to additional sets would be included in the count under "Service to additional set(s)."       Biock 2: If your cable system has rate categories for secondary transmission service that red ifferent from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.         Example, tiers of services that include one or more secondary transmissions, list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.         Example, tiers of services that include one or more secondary transmissions, list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.         • CATEGORY OF SERVICE       BLOCK 1       BLOCK 2         • Service to first set       52       31.35         • Service to additional set(s)		unit in which it is generally billed category, but do not include disc <b>Block 1:</b> In the left-hand block systems most commonly provide that applies to your system. <b>Not</b>	. (Example: "\$2 counts allowed in space E, th to their subsc e: Where an in	20/mth"). S for advan e form list ribers. Gi dividual o	Summarize an ce payment. is the categori ve the numbe r organization	iy standa les of sec r of subse is receiv	rd rate variation condary transmi cribers and rate ing service that	s within a ssion servi for each li falls unde	particular rate ce that cable sted category r different	
F         Services of the standard rate charged by the cable system for each of the applicable services listed.         Services that were not listed in block 2: List any services that gur cable system for each of the applicable services listed.           Bit 1: Give the standard rate charged by the cable system for each of the applicable services listed.         BLOCK 1         BLOCK 2           CATEGORY OF SERVICE         NO. OF         SUBSCRIBERS         RATE         CATEGORY OF SERVICE         NO. OF           Residential         Service to first set         S2         31.35         Service         No. OF           F         Rasidential         Services         Ommercial         Services         Services         Services         Services         Services of asingle fee. There are two exceptions: you do not need to give rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.           Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.         BLOCK 1         BLOCK 2           CATEGORY OF SERVICE         RATE         CATEGORY OF SERVICE         RATE           Installation: Residential         Standard rate charged by the cable system for each of the applicable services listed.         BLOCK 1         BLOCK 2           CATEGORY OF SERVICE         RATE         CATEGORY OF SERVICE <th< td=""><td></td><td>subscriber who pays extra for ca first set" and would be counted or <b>Block 2:</b> If your cable system printed in block 1 (for example, t with the number of subscribers a sufficient.</td><td>ble service to once again und has rate catego iers of services and rates, in the</td><td>additional er "Servic ories for s s that inclu</td><td>sets would be e to additiona econdary tran ude one or mo</td><td>e included I set(s)." smission pre secon</td><td>d in the count ur service that are dary transmissi</td><td>nder "Servi e different t ons), list th</td><td>ce to the from those lem, together</td><td></td></th<>		subscriber who pays extra for ca first set" and would be counted or <b>Block 2:</b> If your cable system printed in block 1 (for example, t with the number of subscribers a sufficient.	ble service to once again und has rate catego iers of services and rates, in the	additional er "Servic ories for s s that inclu	sets would be e to additiona econdary tran ude one or mo	e included I set(s)." smission pre secon	d in the count ur service that are dary transmissi	nder "Servi e different t ons), list th	ce to the from those lem, together	
CATEGORY OF SERVICE         SUBSCRIBERS         RATE         CATEGORY OF SERVICE         SUBSCRIBERS         F           Residential:         Service to first set         52         31.35		BLC						BLOC		
Service to first set     Service to additional set(s)     FM radio (if separate rate)     Motel, hotel     Commercial     Converter     Services     Service     Services		CATEGORY OF SERVICE			RATE	CATI	EGORY OF SE	RVICE		RAT
• FM radio (if separate rate)       image: separate rate)       image: separate rate)       image: separate rate)         Motel, hotel       Commercial       image: separate rate)       image: separate rate)       image: separate rate)       image: separate rate)         Commercial       Converter       -       Residential       image: separate rate)       image:		Service to first set		52	31.35					
Converter       ·Residential         ·Residential       ·Non-residential         ·Non-residential       ·Non-residential         B       Services         Services       SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES         In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information period that were not listed in block 1: Give the standard rate charged by the cable system for each of the applicable services listed.         Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1: and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.         Block 2: List any services       RATE       CATEGORY OF SERVICE       RATE       CATEGORY OF SERVICE       F         Continuing Services:       Installation: Non-residential       ·Notel, hotel       ·Pay cable		• FM radio (if separate rate)								
Non-residential       Image: Constraint of the services of the service of the service of the services of the service										
F       In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission services for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities transmission the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.         Transmissions:       Block 1: Give the standard rate charge dby the cable system for each of the applicable services isted.         Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.         CATEGORY OF SERVICE       RATE       CATEGORY OF SERVICE       F         CATEGORY OF SERVICE       RATE       CATEGORY OF SERVICE       F         Pay cable       •Motel, hotel       •Motel, hotel       •Motel, hotel       •Motel, hotel       •Motel, hotel       •Motel, hotel       •Motel, formation       F         •Pay cable       •Motel, hotel       •Pay cable       •Motel, hotel       •Pay cable       •Motel, hotel       F       F       F       F       F       F       F       F       F       F       F       F										
CATEGORY OF SERVICERATECATEGORY OF SERVICERATECATEGORY OF SERVICERContinuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protectionInstallation: Non-residential • Motel, hotel • Pay cable • Pay cable-add'l channel • Fire protection • Fire protection • Fire protection • Surglar protection • Reconnect • Disconnect • Outlet relocationRATECATEGORY OF SERVICE CATEGORY OF SERVICE • Outlet relocation	Services Other Than Secondary ransmissions:	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	te (not subscrit hose services re two exceptio or facilities furn hit in which it is rate column. te charged by t t your cable sys separate charge	ber) inform that are n ns: you do nished to usually b he cable s stem furni je was ma	nation with res ot offered in c o not need to nonsubscriber illed. If any rat system for eac shed or offere ide or establis	spect to a combination give rate rs. Rate in tes are ch ch of the ed during	on with any sec information con nformation shou narged on a vari applicable servi the accounting	ondary tran cerning (1 Ild include able per-p ces listed. period that	nsmission ) services both the rogram basis, : were not	
Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection • First set • Additional set(s) • FM radio (if separate rate) • ConverterInstallation: Non-residential • Motel, hotel • Commercial • Pay cable • Pa										
• Pay cable       • Motel, hotel       • Commercial         • Pay cable—add'l channel       • Commercial       • Commercial         • Fire protection       • Pay cable       • Pay cable         • Burglar protection       • Pay cable-add'l channel       • Pay cable-add'l channel         • First set       39.99       • Burglar protection       • Fire protection         • First set       39.99       • Burglar protection       • Commercial         • First set       39.99       • Burglar protection       • Commercial         • First set       39.99       • Burglar protection       • Commercial         • Additional set(s)       • Other services:       • Reconnect       49.99         • Converter       5.00       • Disconnect       • Outlet relocation       • Outlet relocation			RATE				RATE	CATEG	ORY OF SERVICE	RATE
• Pay cable—add'l channel       • Commercial         • Fire protection       • Pay cable         • Burglar protection       • Pay cable-add'l channel         • Installation: Residential       • Fire protection         • First set       39.99         • Additional set(s)       • Reconnect         • FM radio (if separate rate)       • Reconnect         • Converter       5.00		-				uentiai				
•Burglar protection       •Pay cable-add'l channel         Installation: Residential       •Fire protection         •First set       39.99         •Additional set(s)       •Burglar protection         •FM radio (if separate rate)       •Reconnect         •Other services:       •Pay cable-add'l channel         •Other services:       •Pay cable-add'l channel         •Other services:       •Pay cable-add'l channel         •Outlet relocation       •Pay cable-add'l channel					,					
Installation: Residential       • Fire protection         • First set       39.99         • Additional set(s)       • Burglar protection         • FM radio (if separate rate)       • Reconnect         • Converter       5.00         • Outlet relocation       • Outlet relocation				• Pay o	able					
• First set     39.99     • Burglar protection       • Additional set(s)     Other services:       • FM radio (if separate rate)     • Reconnect       • Converter     5.00       • Outlet relocation				• Dov o	able-add'l cha	annel				
• Additional set(s)     • Other services:     • Reconnect     • 49.99       • Converter     • Disconnect     • Outlet relocation		Fire protection     Burglar protection								
• FM radio (if separate rate)     • Converter     • Conver     • Converter     • Converte		Fire protection     Burglar protection Installation: Residential		• Fire p	protection					
Converter     5.00     Disconnect     Outlet relocation		<ul> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> </ul>	39.99	• Fire p • Burgl	protection ar protection					
		<ul> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> </ul>	39.99	• Fire p • Burgl Other se	protection ar protection <b>rvices:</b>		49.99			
• Move to new address 39.99		<ul> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>		• Fire p • Burgl Other se • Reco	protection ar protection <b>rvices:</b> nnect		49.99			

Accounting Period: 2	2020/2			FORM SA1-2E. PAGE 3
Name	LEGAL NAME OF OWNER OF	F CABLE SYSTEM:		SYSTEM ID#
	CableSouth Media III,	LLC		33540
	PRIMARY TRANSMITTERS:	TELEVISION		
<b>G</b> Primary	carried by your cable system FCC rules and regulations	entify every television station (including t m 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	(1) stations carried only on a part-time carriage of certain network program	ne basis under ns [sections
Transmitters: Television	substitute program basis, a Substitute Basis Stations	s explained in the next paragraph. With respect to any distant stations ca		
		ules, regulations, or authorizations: e in space G—but do list it in space I (th a substitute basis.	e Special Statement and Program L	og)—if the
	basis. For further information <b>Column 1:</b> List each station	also in space I, if the station was carried on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the	see page (v) of the general instruction rogram services such as HBO, ESP1	ns. J, etc. Identify each
	"WETA-2" as the same on <b>Column 2:</b> Give the channed	5	<b>.</b>	
	<b>Column 3:</b> Indicate in each educational station, by enter (for independent multicast). For the meaning of these terms	a case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), o rms, see page (iv) of the general instru- n of each station. For U.S. stations, list	or network multicast), "I" (for indepe r "E-M" (for noncommercial educatio ctions in the paper SA1-2 form.	ndent), "I-M" nal multicast).
	FCC. For Mexican or Cana	dian stations, if any, give the name of th	e community with which the station i	s identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WLBT	2	Ν	Jackson, MS
	WDAM	3	Ν	Laurel, MS
Add Rows as Necessary	WDAM	4	N	Laurel, MS
	WHPM	5	I	Hattiesburg, MS
	WHLT	6	N	Hattiesburg, MS
	WMAH	7	Е	Hattiesburg, MS
	WHPM	9	Ν	Hattiesburg, MS
			I	

OWNER OF (		ISTEM.					SYSTEM I
Media III, L							33
every radio s	tation ca						н
it is carried by monitoring, to ormation abou m. lentify the call tate whether to the radio stati this by placing	y the syst be receiv t the Co sign of e he station ion's sigr g a check	tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. n is AM or FM. hal was electronically processor ( mark in the "S/D" column.	t the system's hea system's FM anter his point, see pag ed by the cable sy	adend, and (2) nna, during ce ge (v) of the ge ystem as a sej	) it can b ertain sta eneral in parate a	e expected, tted intervals. structions in the. nd discrete	Primary Transmitters Radio
					or, in t	ne case or	
AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
	Media III, L NSMITTERS: t every radio s whose signals ctions Concer it is carried by monitoring, to prmation abour m. lentify the call tate whether the radio station the radio station this by placing ive the stations	Media III, LLC NSMITTERS: RADIO t every radio station ca whose signals were ger stions Concerning AII it is carried by the syst monitoring, to be receiv formation about the Co rm. lentify the call sign of et tate whether the station the radio station's sign this by placing a check ive the station's location adian stations, if any, the	Media III, LLC NSMITTERS: RADIO t every radio station carried on a separate and discret whose signals were generally receivable by your cable stions Concerning All-Band FM Carriage: Under C it is carried by the system whenever it is received at monitoring, to be received at the headend, with the s formation about the Copyright Office regulations on t m. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processes this by placing a check mark in the "S/D" column. Give the station's location (the community to which the ladian stations, if any, the community with which the	Media III, LLC NSMITTERS: RADIO t every radio station carried on a separate and discrete basis and list t whose signals were generally receivable by your cable system during t stions Concerning All-Band FM Carriage: Under Copyright Office re it is carried by the system whenever it is received at the system's heat monitoring, to be received at the headend, with the system's FM anter formation about the Copyright Office regulations on this point, see pag m. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable sy this by placing a check mark in the "S/D" column. ive the station's location (the community to which the station is licens adian stations, if any, the community with which the station is identified	Media III, LLC NSMITTERS: RADIO t every radio station carried on a separate and discrete basis and list those FM stati whose signals were generally receivable by your cable system during the accounting stions Concerning All-Band FM Carriage: Under Copyright Office regulations, an it is carried by the system whenever it is received at the system's headend, and (2) monitoring, to be received at the headend, with the system's FM antenna, during ce formation about the Copyright Office regulations on this point, see page (v) of the ge m. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable system as a se this by placing a check mark in the "S/D" column. Give the station's location (the community to which the station is licensed by the FCC adian stations, if any, the community with which the station is identified).	Media III, LLC NSMITTERS: RADIO t every radio station carried on a separate and discrete basis and list those FM stations carr whose signals were generally receivable by your cable system during the accounting period. ctions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM sign it is carried by the system whenever it is received at the system's headend, and (2) it can be monitoring, to be received at the headend, with the system's FM antenna, during certain state formation about the Copyright Office regulations on this point, see page (v) of the general in rm. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable system as a separate at this by placing a check mark in the "S/D" column. Ever the station's location (the community to which the station is licensed by the FCC or, in the adian stations, if any, the community with which the station is identified).	Media III, LLC NSMITTERS: RADIO t every radio station carried on a separate and discrete basis and list those FM stations carried on an whose signals were generally receivable by your cable system during the accounting period. tetions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. formation about the Copyright Office regulations on this point, see page (v) of the general instructions in the. m. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable system as a separate and discrete this by placing a check mark in the "S/D" column. ive the station's location (the community to which the station is licensed by the FCC or, in the case of radian stations, if any, the community with which the station is identified).

Accounting Perio							FOR	M SA1-2E. PAGE 5.
Name	LEGAL NAME OF OWNER OF		EM:					SYSTEM ID#
Name	CableSouth Media III, I	LC						33540
	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG	i			
1	In General: In space I, identi							
Substitute	substitute basis during the ad explanation of the programm							
Carriage:	1. SPECIAL STATEMENT	-			- <b>-</b>		F-F	
Special	During the accounting per				is. anv nonne	twork televisi	ion program	n
Statement and Program Log	broadcast by a distant stat		,	<u>,</u>	, ,		YES	NO
l rogram Log					"X"			
	Note: If your answer is "No	, leave the	rest of this pag	e blank. If your answer is	"Yes," you mu	list complete	the program	m
	log in block 2. 2. LOG OF SUBSTITUTE	DROCRA	MS					
	In General: List each subst			te line. Use abbreviations	wherever pos	sible, if their	meaning is	5
	clear. If you need more spa	ce, please a	add additional r	ows to the tables.			•	
				sion program ("substitute				
	period, was broadcast by a under certain FCC rules, re							
	Do not use general categor	ies like "mo						
		n was broad		"Yes." Otherwise enter "I				
		0		sting the substitute progra e community to which the		nsed by the	ECC or in	
	the case of Mexican or Can						10001,111	
		,	when your syst	em carried the substitute	program. Use	e numerals, w	ith the mor	nth
	first. Example: for May 7 giv		substitute prov	gram was carried by your	cable system	List the time	e accurate	by .
	to the nearest five minutes.							iy
	stated as "6:00-6:30 p.m."							
	to delete under FCC rules a			was substituted for progra				
	was substituted for program							am
	effect on October 19, 1976.							
	s	UBSTITUT	E PROGRAM			EN SUBSTIT		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TII	MES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM -	- то	
					.			
					.			
						_	-	
						_	_	
					.			
						-	_	
							_	
							-	
						_	_	
						_	_	
						-	-	

Accounting Period:	2020/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SY	STEM ID#
	CableSouth Media III, LLC		33540
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a 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.	ission service	58
	COPYRIGHT ROYALTY FEE		
L Copyright Royalty Fee	<ul> <li>Instructions: To compute the royalty fee you owe:</li> <li>Complete block 1, block 2, or block 3.</li> <li>Use block 1 if the amount of gross receipts in space K is \$137,100 or less</li> <li>Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 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.</li> </ul>	263,800	
	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 t accounting period is \$52.00	his six-month	
	Line 1. Royalty fee for accounting period	\$	52.00
	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 1 and 2	\$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	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 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 \$ 263,800.00		
	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	0.00	
	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) FAL	SE	
	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	\$	15.00
	EFT Trace # or TRANSACTION ID #		
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo		

Accounting Period:	2020/2				FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF O	WNER OF CABLE SYSTEM: edia III, LLC			SYSTEM ID# 33540
M Channels	to its subscriber 1. Enter the tota	s, and (2) the cable system's to	otal numb n the cabl	s on which the cable system carried television broadcast stations ber of activated channels during the accounting period. e	. 8
	on which the	I number of activated channels cable system carried television dcast services	n broadca	st stations	. 178
N Individual to Be Contacted		BE CONTACTED IF FURTHI about this statement of accoun		RMATION IS NEEDED (Identify an individual to whom	
for Further Information	Name	Cristy Workman		Telephon	9 731-686-9227
	Address	1056 Jones Blvd (Number, street, rural route, apartm Milan, TN 38358 (City, town, state, zip)	nent, or suit	e number)	
	Email	cworkman@swy	ftconnec	t.com Fax (optional	
ο		This statement of account mus	st be cert	ified and signed in accordance with Copyright Office regulations)	
Certification	• I, the undersigne	d, hereby certify that (Check one	e, but only	<i>r one</i> , of the boxes.)	
	(Owne	r other than corporation or pa	artnership	<ul> <li>) I am the owner of the cable system as identified in line 1 of space</li> </ul>	B; or
		in line 1 of space B and that the	e owner is	rtnership) I am the duly authorized agent of the owner of the cable not a corporation or partnership; or	
		in line 1 of space B.		tion) or a partner (if a partnership) of the legal entity identified as on	
		te, and correct to the best of my		lare under penalty of law that all statements of fact contained herein je, information, and belief, and are made in good faith.	
			X	/s/ Thomas Pate	-
				ectronic signature on the line above to certify this statement. ature using an "/s/ signature" (e.g., /s/ John Smith)	
		Typed or printed r	name:	Thomas Pate	
			CFO e of official	position held in corporation or partnership)	
		Date:		3/1/2021	

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.

	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
bleSouth Media III, LLC	3354
<ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</li> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:         <ul> <li>"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."</li> </ul> </li> <li>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.</li> <li>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?</li> <li>NO</li> <li>YES. Enter the total here and list the satellite carrier(s) below</li></ul>	P Special Statement Concerning Gross Receipts Exclusion
Name     Name       Mailing Address     Mailing Address	
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 Assessment
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	
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
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	
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	 ays 
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	 ays 
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	ays 
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	ays 
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	ays 
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	ays 

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.