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

5892

STATEM	ENT OF ACCOUNT	FOR COPYRIGHT	OFFICE USE ONLY	by email to:
	ry Transmissions by	DATE RECEIVED	AMOUNT	<u>coplicsoa@loc.gov</u>
General instru	oms (Short Form) ctions are located of this workbook	02/17/2021	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YYY	Y/(Period)) Period 2 = July 1 - December 31	
Accounting Period	20202	Barcode Data Filing Period (optional - s	ee instructions)	
	Instructions:			
В	Give the full legal name of the owner of th of the subsidiary, not that of the parent co		ry of another corporation, give the full corp	porate title
Owner	List any other name or names under which	h the owner conducts the business of the o	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.

		eneck here it this is the system's instraining. If not, enter the system's is humber using ited by the Electioning Station.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		Fidelity Cablevision, LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		CoBridge Broadband, LLC dba Fidelity Communications
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		64 N Clark (Number, street, rural route, apartment, or suite number)
		Sullivan, MO 63080 (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 suffciency of the fling, a determination that would be made by a court of law.

Poturn completed workbook

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Fidelity Cablevision, LLC	5892
D	Instructions: List each separate community served by the cable system. A ' "a separate and distinct community or municipal entity (including unincorp discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community t as the "first community." Please use it as the first community on all future	porated communities within unincorporated areas and including single, that you list will serve as a form of system identification hereafter knowr filings.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, o identified city.	r mobile home parks should be reported in parentheses below the
First	CITY OR TOWN EI Dorado Springs	MO
Community		
dd Rows as Necessary		

Name	LEGAL NAME OF OWNER OF C								-2E. PAGE
	Fidelity Cablevision, LL							515	589
		.0							
Е	SECONDARY TRANSMISSION								
	In General: The information in s system, that is, the retransmission								
Secondary	about other services (including p								
Transmission	last day of the accounting period	l (June 30 or E)ecemb	er 31, as the ca	ise may be	e).		0	
Service: Sub-	Number of Subscribers: Both	•					,		
scribers and Rates	down by categories of secondar each category by counting the n			•		•			
Rules	separately for the particular serv		0	•••		•		onarged	
	Rate: Give the standard rate of	-	-				-		
	unit in which it is generally billed category, but do not include disc				iny standa	rd rate variation	is within a	particular rate	
	Block 1: In the left-hand block				ries of sec	ondary transmis	ssion servi	ce that cable	
	systems most commonly provide	e to their subso	ribers.	Give the number	er of subso	cribers and rate	for each lis	sted category	
	that applies to your system. Not			-		-			
	categories, that person or entity subscriber who pays extra for ca				• •		•		
	first set" and would be counted of								
	Block 2: If your cable system	-		•					
	printed in block 1 (for example, t with the number of subscribers a					•	,.		
	sufficient.	and rates, in th	e nym-	Hand DIOCK. A ti		e-word descript		Service is	
	BLC	DCK 1	-				BLOCK		T
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:								
	 Service to first set 		249	38.99					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel		1	16.00					
	Commercial		5	15.50					
	Converter								
	Residential Non-residential								
	• Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	ANSMIS	SSIONS: RATE	S				
F	In General: Space F calls for ra	te (not subscri	ber) info	ormation with re	espect to a	Il your cable sy	stem's serv	rices that were	
Г	not covered in space E, that is, t								
Services	service for a single fee. There ar furnished at cost or (2) services	•			0				
Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the			1 f			11-41		
ransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that			•				were not	
Ruico	listed in block 1 and for which a	• •			-	-	-		
	brief (two- or three-word) description and include the rate for each.								
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATE	GORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services:			ation: Non-res	idential		_ .		
	• Pay cable	рр		otel, hotel		\$80/hr	Tier		56.0
	Pay cable—add'l channel Fire protection		_	ommercial		\$80/hr	Tier Digital	Pasia	13.0
	Fire protection Burglar protection			y cable v cable add'l ch	annal		Digital Digital		12.0 7.9
	 Burglar protection 			y cable-add'l ch e protection	annen		Digital		/ .3
	Installation: Residential		FII						
	Installation: Residential • First set	\$80/br	• Ru	•					
	• First set	\$80/hr		rglar protection					
	First setAdditional set(s)	\$80/hr	Other	•		\$25			
	• First set	\$80/hr	Other • Re	rglar protection services:		\$25			
	First setAdditional set(s)FM radio (if separate rate)	\$80/hr	Other • Re • Dis	rglar protection services: connect		\$25			

counting Period:	2020/2			FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID
Name	Fidelity Cablevision,	LLC		5892
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary Transmitters: Television	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(d substitute program basis, a Substitute Basis Stations basis under specific FCC ru • Do <i>not</i> list the station here, station was carried <i>only</i> on • List the station here, and basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on Column 2: Give the chann of license. For example, WC Column 3: Indicate in each (for independent multicast) For the meaning of these to Column 4: Give the location	also in space I, if the station was carrie 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	t (1) stations carried only on a part- he carriage of certain network progra a(e)(2) and (4))]; and (2) certain sta arried by your cable system on a sul he Special Statement and Program d both on a substitute basis and also see page (v) of the general instruct program services such as HBO, ESF e-air designation. For example, repo- evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indep or "E-M" (for noncommercial educati actions in the paper SA1-2 form.	time basis under ams [sections tions carried on a bstitute program Log)—if the p on some other ions. PN, etc. Identify each ort multistream the air in its community a noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	КОАМ	7.1	N	PTTSBURG, KS
	KOLR	10.1	N	SPRINGFIELD, MO
dd Rows as Necessary	KOZK	21.1	E	SPRINGFIELD, MO
Rows as Necessary				
·····,			I	***
	KOZL	27.1	1	SPRINGFIELD, MO
,	KOZL KOZL-DT2	27.1 27.2	I I-M	SPRINGFIELD, MO SPRINGFIELD, MO
,	KOZL KOZL-DT2 KOZL-DT3	27.1 27.2 27.3	I I-M I-M	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO
,	KOZL KOZL-DT2 KOZL-DT3 KRBK	27.1 27.2 27.3 49.1	i i-M i-M N	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2	27.1 27.2 27.3 49.1 49.2	I I-M I-M N I-M	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3	27.1 27.2 27.3 49.1 49.2 49.3	I I-M I-M N I-M I-M	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR	27.1 27.2 27.3 49.1 49.2 49.3 33.1	I I-M I-M N I-M I-M N	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3	27.1 27.2 27.3 49.1 49.2 49.3	I I-M I-M N I-M I-M	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR	27.1 27.2 27.3 49.1 49.2 49.3 33.1	I I-M I-M N I-M I-M N	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR KSPR-DT2	27.1 27.2 27.3 49.1 49.2 49.3 33.1 33.2	I I-M I-M N I-M I-M N I-M	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO SPRINGFIELD, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR KSPR-DT2 KSPR-DT2	27.1 27.2 27.3 49.1 49.2 49.3 33.1 33.2 33.3	I I-M I-M N I-M I-M I-M I-M	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO SPRINGFIELD, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR KSPR-DT2 KSPR-DT3 KYTV	27.1 27.2 27.3 49.1 49.2 49.3 33.1 33.2 33.3 3.1	I I-M I-M N I-M I-M N I-M N I-M N N N	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR KSPR-DT2 KSPR-DT3 KYTV	27.1 27.2 27.3 49.1 49.2 49.3 33.1 33.2 33.3 3.1	I I-M I-M N I-M I-M N I-M N I-M N N N	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR KSPR-DT2 KSPR-DT3 KYTV	27.1 27.2 27.3 49.1 49.2 49.3 33.1 33.2 33.3 3.1	I I-M I-M N I-M I-M N I-M N I-M N N N	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR KSPR-DT2 KSPR-DT3 KYTV	27.1 27.2 27.3 49.1 49.2 49.3 33.1 33.2 33.3 3.1	I I-M I-M N I-M I-M N I-M N I-M N N N	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR KSPR-DT2 KSPR-DT3 KYTV	27.1 27.2 27.3 49.1 49.2 49.3 33.1 33.2 33.3 3.1	I I-M I-M N I-M I-M N I-M N I-M N N N	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR KSPR-DT2 KSPR-DT3 KYTV	27.1 27.2 27.3 49.1 49.2 49.3 33.1 33.2 33.3 3.1	I I-M I-M N I-M I-M N I-M N I-M N N N	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR KSPR-DT2 KSPR-DT3 KYTV	27.1 27.2 27.3 49.1 49.2 49.3 33.1 33.2 33.3 3.1	I I-M I-M N I-M I-M N I-M N I-M N N N	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO
	KOZL KOZL-DT2 KOZL-DT3 KRBK KRBK-DT2 KRBK-DT3 KSPR KSPR-DT2 KSPR-DT3 KYTV	27.1 27.2 27.3 49.1 49.2 49.3 33.1 33.2 33.3 3.1	I I-M I-M N I-M I-M N I-M N I-M N N N	SPRINGFIELD, MO SPRINGFIELD, MO SPRINGFIELD, MO OSAGE BEACH, MO OSAGE BEACH, MO OSAGE BEACH, MO SPRINGFIELD, MO

Fidelity Cab	OWNER OF C		ISTEM:					SYSTEM 58
	every radio s	tation ca	rried on a separate and discre nerally receivable by your cab					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 abou m. lentify the call tate whether t the radio stati this by placing sive the statior	y the sys be recei t the Co sign of e he statio ion's sign g a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on t 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	t the system's he system's FM ante his point, see pa ed by the cable s e station is licens	adend, and (2 nna, during co ge (v) of the g ystem as a se sed by the FC	!) it can ertain st eneral 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	
		5,5		C, ILL OION		5,0		
						·		

Accounting Perio							FOR	M SA1-2E. PAGE 5.
Nama	LEGAL NAME OF OWNER OF		STEM:					SYSTEM ID#
Name	Fidelity Cablevision, L	LC.						5892
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	NT AND PROGRAM LC	G			
	In General: In space I, ident	ifv everv no	nnetwork telev	<i>ision program</i> , broadcast b	v a distant sta	tion. that vo	our cable svs	tem carried on a
	substitute basis during the a	iccounting p	eriod, under sp	pecific present and former F	CC rules, reg	ulations, or	authorizatio	ns. For a further
Substitute	explanation of the programm				he general in	structions ir	the paper S	SA1-2 form.
Carriage: Special	1. SPECIAL STATEMEN	-						
Statement and	 During the accounting per 	•	ur cable syster	m carry, on a substitute ba	isis, any noni	network tel	evision prog	
Program Log	broadcast by a distant sta	tion?					YES	X NO
	Note: If your answer is "No	", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you i	must comp	lete the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI							
	In General: List each subs clear. If you need more spa				s wherever p	ossible, if t	heir meaning	g is
				vision program ("substitute	e program") t	hat, during	the account	ting
	period, was broadcast by a	distant sta	tion and that y	our cable system substitu	ted for the pr	ogramming	of another	station
	under certain FCC rules, re Do not use general categor							
	"NBA Basketball: 76ers vs.			erball. List specific progra		example, i	LOVE LUCY	0
				er "Yes." Otherwise enter				
				casting the substitute prog the community to which th		concod by	the ECC or	in
	the case of Mexican or Car							
	Column 5: Give the mor	nth and day		stem carried the substitute			ls, with the r	nonth
	first. Example: for May 7 gi		o cubetituto pr	ogram was carried by you	r cablo sveto	m list the	timos occur	atoly
	to the nearest five minutes.			ogram was carried by you ried by a system from 6:0				alely
	stated as "6:00-6:30 p.m."				·			
	Column 7: Enter the lett to delete under FCC rules			n was substituted for prog				
	was substituted for program							ograffi
	effect on October 19, 1976		, ,			0		
						N SUBSTI	TUTE	
	s	UBSTITUT	E PROGRAM	1		AGE OCC		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH		TIMES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	— то	
							_	
							<u> </u>	
							_	
							_	
								"
							<u> </u>	
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Accounting Period:	2020/2	FORM SA	1-2E. PAGE 6.
Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	YSTEM ID#
Name	Fidelity Cablevision, LLC		5892
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 transmi (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.	ssion service mount, see	3,858.00 ss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 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.	63,800	
	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-mon	
	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)		<u> </u>
	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		
	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)	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
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informati		hts!

Accounting Period:	2020/2						FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF ON Fidelity Cablevi	WNER OF CABLE SYSTEM: ision, LLC					SYSTEM ID# 5892
M Channels	 to its subscribers, 1. Enter the total r system carried to 2. Enter the total r on which the cat 	, and (2) the cable system's number of channels on which	total numb ch the cable s els n broadcas	st stations	ring the ac	ccounting period.	21
N Individual to Be Contacted		BE CONTACTED IF FURT		RMATION IS NEEDED (Ide	entify an in		
for Further Information	Name	Melinda Lahmann				Telephone	₂ 573-468-1216
		64 N Clark (Number, street, rural route, apar Sullivan, MO 63080 (City, town, state, zip)		ite number)			
	Email	melinda.lahma	ann@fideli	itycommunications.com		Fax (optional)	
O Certification	I, the undersigned (Owner (Agent in lin X (Office in lin I have examined	d, hereby certify that (Check r other than corporation or of owner other than corpo ne 1 of space B and that the er or partner) I am an officer ne 1 of space B. the statement of account and and correct to the best of m	one, <i>but on</i> partnershi ration or p owner is no (if a corpor d hereby de	rtified and signed in accorda nly one, of the boxes.) ip) I am the owner of the cab partnership) I am the duly au ot a corporation or partnershi ration) or a partner (if a partn eclare under penalty of law th ge, information, and belief, an	le system ; thorized ac ip; or ership) of f	as identified in line 1 of space gent of the owner of the cable the legal entity identified as o ements of fact contained here	e B; or e system as identified wner of the cable system
				/s/ Raymond Storck electronic signature on the lin nature using an "/s/ signature			-
		Typed or printe	Vice P	Raymond Storck President Finance			
		(Title of Date:	official positic	on held in corporation or partnersh	ιφ)	2/11/21	

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
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
lelity Cablevision, LLC	589
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 and e by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below. \$	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address	
INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
	- - -
x days 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 - 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 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 - Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - 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@loc.gov. For further assistance please	-
x	-
x	
x	
x	
x	

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.